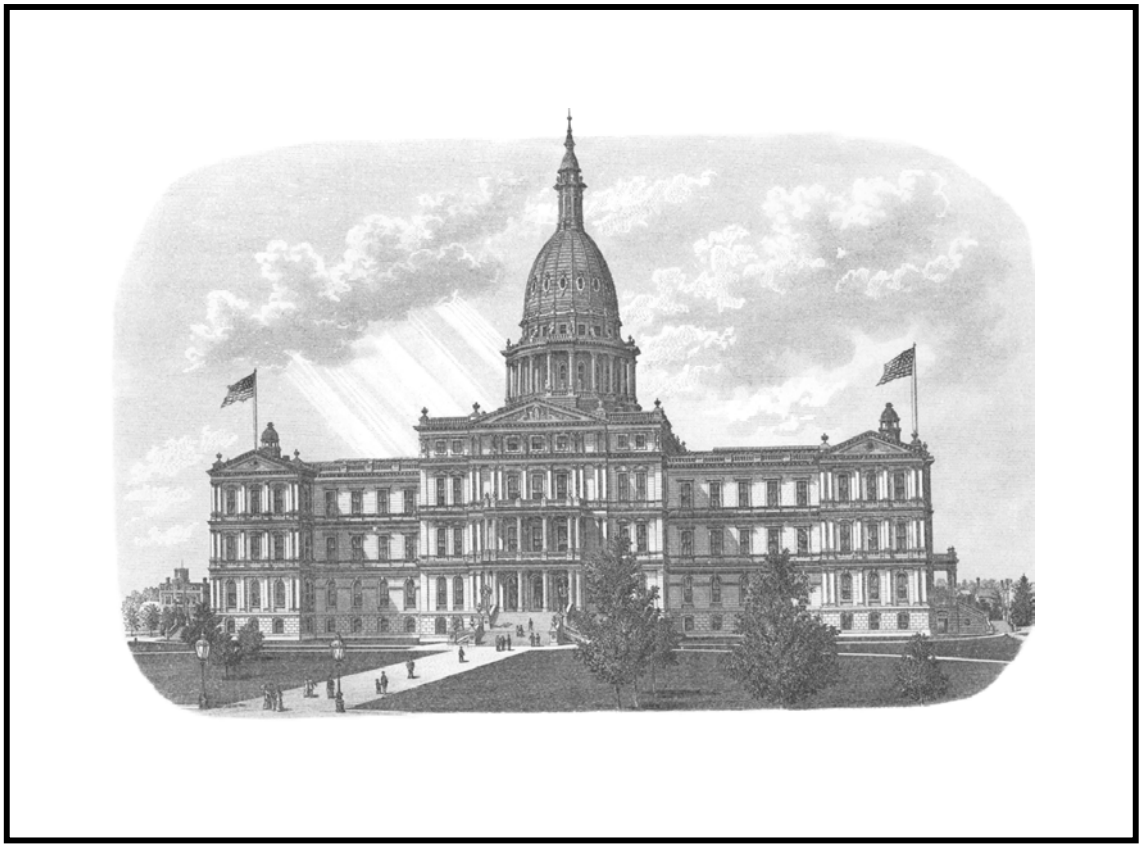
# Michigan Register

Issue No. 18– 2005 (Published October 15, 2005)



**GRAPHIC IMAGES IN THE**

# MICHIGAN REGISTER

## COVER DRAWING

### *Michigan State Capitol:*

This image, with flags flying to indicate that both chambers of the legislature are in session, may have originated as an etching based on a drawing or a photograph. The artist is unknown. The drawing predates the placement of the statue of Austin T. Blair on the capitol grounds in 1898.

(Michigan State Archives)

## PAGE GRAPHICS

### *Capitol Dome:*

The architectural rendering of the Michigan State Capitol's dome is the work of Elijah E. Myers, the building's renowned architect. Myers inked the rendering on linen in late 1871 or early 1872. Myers' fine draftsmanship, the hallmark of his work, is clearly evident.

Because of their size, few architectural renderings of the 19th century have survived. Michigan is fortunate that many of Myers' designs for the Capitol were found in the building's attic in the 1950's. As part of the state's 1987 sesquicentennial celebration, they were conserved and deposited in the Michigan State Archives.

(Michigan State Archives)

### *East Elevation of the Michigan State Capitol:*

When Myers' drawings were discovered in the 1950's, this view of the Capitol – the one most familiar to Michigan citizens – was missing. During the building's recent restoration (1989-1992), this drawing was commissioned to recreate the architect's original rendering of the east (front) elevation.

(Michigan Capitol Committee)

# Michigan Register

**Published pursuant to § 24.208 of**
**The Michigan Compiled Laws**

Issue No. 18— 2005
(This issue, published October 15, 2005, contains
documents filed from September 15, 2005 to October 1, 2005)

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**Peter Plummer**, Executive Director, State Office of Administrative Hearings and Rules; **Deidre O'Berry**, Administrative Rules Analyst for Operations and Publications.

**Jennifer M. Granholm, Governor**

**John D. Cherry Jr., Lieutenant Governor**

# PREFACE

## PUBLICATION AND CONTENTS OF THE MICHIGAN REGISTER

The State Office of Administrative Hearings and Rules publishes the *Michigan Register*.

While several statutory provisions address the publication and contents of the *Michigan Register*, two are of particular importance.

MCL 24.208 states:

Sec. 8 (1) The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:

(a) Executive orders and executive reorganization orders.
(b) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills signed into law by the governor during the calendar year and the corresponding public act numbers.
(c) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills vetoed by the governor during the calendar year.
(d) Proposed administrative rules.
(e) Notices of public hearings on proposed administrative rules.
(f) Administrative rules filed with the secretary of state.
(g) Emergency rules filed with the secretary of state.
(h) Notice of proposed and adopted agency guidelines.
(i) Other official information considered necessary or appropriate by the State Office of Administrative Hearings and Rules.
(j) Attorney general opinions.
(k) All of the items listed in section 7(1) after final approval by the certificate of need commission or the statewide health coordinating council under section 22215 or 22217 of the public health code, 1978 PA 368, MCL 333.22215 and 333.22217.

(2) The State Office of Administrative Hearings and Rules shall publish a cumulative index for the Michigan register.

(3) The Michigan register shall be available for public subscription at a fee reasonably calculated to cover publication and distribution costs.

(4) If publication of an agency's proposed rule or guideline or an item described in subsection (1)(k) would be unreasonably expensive or lengthy, the State Office of Administrative Hearings and Rules may publish a brief synopsis of the proposed rule or guideline or item described in subsection (1)(k), including information on how to obtain a complete copy of the proposed rule or guideline or item described in subsection (1)(k) from the agency at no cost.

(5) An agency shall transmit a copy of the proposed rules and notice of public hearing to the State Office of Administrative Hearings and Rules for publication in the Michigan register.

MCL 4.1203 states:

Sec. 203. (1) The Michigan register fund is created in the state treasury and shall be administered by the State Office of Administrative Hearings and Rules. The fund shall be expended only as provided in this section.

(2) The money received from the sale of the Michigan register, along with those amounts paid by state agencies pursuant to section 57 of the administrative procedures act of 1969, 1969 PA 306, MCL 24.257, shall be deposited with the state treasurer and credited to the Michigan register fund.

(3) The Michigan register fund shall be used to pay the costs preparing, printing, and distributing the Michigan register.

(4) The department of management and budget shall sell copies of Michigan register at a price determined by the State Office of Administrative Hearings and Rules not to exceed cost of preparation, printing, and distribution.

(5) Notwithstanding section 204, beginning January 1, 2001, the State Office of Administrative Hearings and Rules shall make the text of the Michigan register available to the public on the internet.

(6) The information described in subsection (5) that is maintained by the State Office of Administrative Hearings and Rules shall be made available in the shortest feasible time after the information is available. The information described in subsection (5) that is not maintained by the State Office of Administrative Hearings and Rules shall be made available in the shortest feasible time after it is made available to the State Office of Administrative Hearings and Rules.

(7) Subsection (5) does not alter or relinquish any copyright or other proprietary interest or entitlement of this state relating to any of the information made available under subsection (5).

(8) The State Office of Administrative Hearings and Rules shall not charge a fee for providing the Michigan register on the internet as provided in subsection (5).

(9) As used in this section, "Michigan register" means that term as defined in section 5 of the administrative procedures act of 1969, 1969 PA 306, MCL 24.205.

## CITATION TO THE MICHIGAN REGISTER

The *Michigan Register* is cited by year and issue number. For example, 2001 MR 1 refers to the year of issue (2001) and the issue number (1).

## CLOSING DATES AND PUBLICATION SCHEDULE

The deadlines for submitting documents to the State Office of Administrative Hearings and Rules for publication in the *Michigan Register* are the first and fifteenth days of each calendar month, unless the submission day falls on a Saturday, Sunday, or legal holiday, in which event the deadline is extended to include the next day which is not a Saturday, Sunday, or legal holiday. Documents filed or received after 5:00 p.m. on the closing date of a filing period will appear in the succeeding issue of the *Michigan Register*.

The State Office of Administrative Hearings and Rules is not responsible for the editing and proofreading of documents submitted for publication.

Documents submitted for publication should be delivered or mailed in an electronic format to the following address: MICHIGAN REGISTER, State Office of Administrative Hearings and Rules, Ottawa Building - Second Floor, 611 W. Ottawa, P.O. Box 30695, Lansing, MI 48933.

## RELATIONSHIP TO THE MICHIGAN ADMINISTRATIVE CODE

The *Michigan Administrative Code* (1979 edition), which contains all permanent administrative rules in effect as of December 1979, was, during the period 1980-83, updated each calendar quarter with the publication of a paperback supplement. An annual supplement contained those permanent rules, which had appeared in the 4 quarterly supplements covering that year.

Quarterly supplements to the Code were discontinued in January 1984, and replaced by the monthly publication of permanent rules and emergency rules in the *Michigan Register*. Annual supplements have included the full text of those permanent rules that appear in the twelve monthly issues of the *Register* during a given calendar year. Emergency rules published in an issue of the *Register* are noted in the annual supplement to the Code.

## SUBSCRIPTIONS AND DISTRIBUTION

The *Michigan Register*, a publication of the State of Michigan, is available for public subscription at a cost of $400.00 per year. Submit subscription requests to: State Office of Administrative Hearings and Rules, Ottawa Building - Second Floor, 611 W. Ottawa, P.O. Box 30695, Lansing, MI 48933. Checks Payable: State of Michigan. Any questions should be directed to the State Office of Administrative Hearings and Rules (517) 241-1679.

## INTERNET ACCESS

The *Michigan Register* can be viewed free of charge on the Internet web site of the State Office of Administrative Hearings and Rules: www.michigan.gov/cis/0,1607,7-154-10576_35738---,00.html

Issue 2000-3 and all subsequent editions of the *Michigan Register* can be viewed on the State Office of Administrative Hearings and Rules Internet web site. The electronic version of the *Register* can be navigated using the blue highlighted links found in the Contents section. Clicking on a highlighted title will take the reader to related text, clicking on a highlighted header above the text will return the reader to the Contents section.

Peter Plummer, Executive Director
State Office of Administrative Hearings and Rules

## 2005 PUBLICATION SCHEDULE

| Issue No. | Closing Date for Filing or Submission Of Documents (5 p.m.) | Publication Date |
|---|---|---|
| 1 | January 15, 2005 | February 1, 2005 |
| 2 | February 1, 2005 | February 15, 2005 |
| 3 | February 15, 2005 | March 1, 2005 |
| 4 | March 1, 2005 | March 15, 2005 |
| 5 | March 15, 2005 | April 1, 2005 |
| 6 | April 1, 2005 | April 15, 2005 |
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## ADMINISTRATIVE RULES FILED WITH SECRETARY OF STATE



## PROPOSED ADMINISTRATIVE RULES, NOTICES OF PUBLIC HEARINGS

## ADMINISTRATIVE RULES
## FILED WITH THE SECRETARY OF STATE

*MCL 24.208 states in part:*

*"Sec. 8. (1) The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:*

*  *  *

*(f) Administrative rules filed with the secretary of state."*

## ADMINISTRATIVE RULES

SOAHR 2004-004

DEPARTMENT OF COMMUNITY HEALTH

DIRECTOR'S OFFICE

BOARD OF PSYCHOLOGY - GENERAL RULES

Filed with the Secretary of State on September 23, 2005
These rules take effect immediately upon filing with the Secretary of State

(*By authority conferred on director of the department of community health by section 18201 of 1978 PA 368, MCL 333.18201 et seq. and Executive Reorganization Order Nos. 1996-1, 1996-2 and 2003-1, being MCL 330.3101, 445.2001 and 445.2011)*

R 338.2501, R 338.2506, R 338.2507, R 338.2507a, and R 338.2510 are amended and R 338.2510a is added to the Michigan Administrative Code, as follows:

R 338.2501 Definitions.
Rule 1. (1) As used in these rules:
(a) "Code" means 1978 PA 368,MCL 333.1101 et seq.
(b) "Organized health care setting" means an organized governmental entity, nonprofit organization, or a private agency, institution, or organization engaged in the delivery of health care services which provides an opportunity for continuous professional interaction and collaboration with other disciplines, an opportunity to utilize a variety of theories, and an opportunity to work with a broad range of populations and techniques.
(2) The terms defined in the code have the same meanings when used in these rules.

R 338.2506 Application for licensure; education, training, and experience requirements.
Rule 6. To be granted a license under section 18223(1) of the code, an applicant shall satisfy all of the following requirements:
(a) Education: An applicant shall possess either a doctoral degree in psychology or a doctoral degree in a closely related field from an institution that meets the standards in R 338.2511(3). Either degree shall comply with all of the following:
(i) The degree shall be an integrated, organized sequence of study that includes instruction in research design and methodology, statistics, psychometrics, and scientific and professional ethics and standards.
(ii) The degree shall include at least 1 graduate course, taken for credit, from 3 of the 4 following areas:
(A) Biological bases of behavior: physiological psychology, comparative psychology, neuropsychology, sensation and perception, and psychopharmacology.
(B) Cognitive-affective bases of behavior: learning, thinking, motivation, and emotion.
(C) Social bases of behavior: social psychology, group processes, and organizational and systems theory.
(D) Individual differences: personality theory, human development, and abnormal psychology.
(iii) The degree shall include at least 1 course in both assessment and treatment.

(iv) Seventy-five percent of the hours required for the degree shall be primarily psychological in content. The dissertation and internship are excluded from what is considered course work. To be deemed psychological in content, a course shall satisfy at least 1 of the following criteria:
(A) Course work: The subject matter of the material taught is psychological.
(B) Psychology department: The course is taught in a psychology department.
(b) Training: An applicant shall have participated in an internship program that complies with all of the following:
(i) The internship provides the applicant with substantial opportunities to carry out major professional functions in the context of appropriate supervisory support.
(ii) The internship is an integrated part of the doctoral degree program; however, a postdoctoral internship may be recognized by the board if it meets the other requirements in this subdivision.
(iii) The internship takes place in an organized health care setting, as defined in R 338.2501(l)(b), or other arrangement receiving approval of the board.
(iv) The internship requires the applicant to work not less than 20 clock hours per week in the internship program.
(v) The internship requires not less than 2,000 clock hours of psychological work.
(vi) The applicant is supervised by a psychologist who is licensed in Michigan, eligible for licensure in Michigan, or who is licensed or certified at the independent practice level in the state where the internship takes place.
(vii) The applicant shall meet individually and in person with his or her supervisor for a minimum of 8 hours a month during the internship program. This subdivision takes effect January 1, 2006.
(viii) The internship is separate and distinct from the applicant's required experience in the practice of psychology.
(c) Experience: An applicant shall have acquired 2 years of postdoctoral experience in the practice of psychology which meets all of the following criteria:
(i) The experience constitutes not less than 4,000 clock hours.
(ii) Not more than 2,080 clock hours of acceptable experience is accumulated in any 1 calendar year.
(iii) The experience shall be accumulated at not less than 16 clock hours per week.
(iv) The applicant shall function as a psychologist using generally accepted applications of psychological knowledge and techniques acquired during the applicant's education and training.
(v) The experience is acquired in an organized health care setting, as defined in R 338.2501(1)(b), or other arrangement receiving approval of the board.

R 338.2507 Application for limited license; education, training, and experience requirements.
Rule 7. To be granted a limited license under section 18223(2) of the code, an applicant shall comply with either of the following:
(a) Have been certified as a psychological examiner or eligible for certification as a psychological examiner under 1959 PA 257, MCL 338.1001 et seq. on or before September 30, 1978.
(b) Individuals who apply for licensure under section 18223(2) of the code and who are not eligible under subdivision (a) of this subrule shall meet the following education, training, and experience requirements:
(i) Education: Applicants for a limited license shall have earned a master's degree in psychology from an institution which meets the standards provided in R 338.2511(3).
(ii) Individuals who are enrolled in a master's degree program that qualified them for a limited license before the effective date of this amendatory rule and who apply for a limited license within 5 years of the effective date of this amendatory rule shall be eligible for a limited license under section 18223(2) of the code. The degree required under this subdivision shall satisfy all of the following requirements:

(A) The degree shall be an integrated, organized sequence of study that includes at least 1 course in assessment, 1 course in treatment, and 1 course in scientific and professional ethics and standards.
(B) Seventy-five percent of the hours of the required course work shall be primarily psychological in content. The thesis and practicum are excluded from what is considered course work. The board may require the applicant to provide such material as it deems necessary to demonstrate the psychological content of a course. To be deemed psychological in content, a course shall satisfy at least 1 of the following criteria:
(1) Course work: The subject matter of the material taught is psychological.
(2) Psychology department: The course is taught in a psychology department.
(iii) Training: An applicant shall have participated in a practicum that complies with all of the following:
(A) The practicum shall be an integrated part of the master's degree program; however, a post-degree practicum may be recognized by the board if such a practicum is through an institution that meets the standards adopted in R 338.2511(3) and for which academic graduate credit is obtained. The practicum shall also meet the other requirements set forth in this paragraph.
(B) The practicum requires not less than 500 clock hours of psychological work.
(C) The applicant is supervised by a psychologist who is licensed or eligible for licensure in Michigan, or who is licensed or certified at the independent practice level in the state where the practicum takes place.
(D) The applicant shall meet in person with his or her supervisor for a minimum of 8 hours a month during the practicum. This subdivision takes effect January 1, 2006.
(iv) Experience: Individuals applying after September 30, 1980, in addition to the requirements of paragraphs (i) and (ii) of this subdivision, shall have acquired 1 year of post-master's degree experience in the practice of psychology. To acquire the experience, the applicant shall obtain a temporary limited license for post-master's degree experience as provided in R 338.2507a. The experience shall comply with all of the following requirements:
(A) The experience shall constitute not less than 2,000 clock hours.
(B) The experience shall be accumulated at not less than 16 clock hours per week nor more than 40 clock hours per week.
(C) The applicant shall function as a psychologist using generally accepted applications of psychological knowledge and techniques acquired during the applicant's education and training.
(D) The experience shall be acquired in an organized health care setting, as defined in R 338.2501(1)(b), or other arrangement receiving approval by the board.
(E) The applicant shall be supervised by a psychologist who is licensed in Michigan, eligible for licensure in Michigan, or who is licensed or certified at the independent practice level in the state where the experience is obtained.
(F) The applicant shall meet individually and in person with his or her supervisor for a minimum of 4 hours a month during the 2,000 clock hours of post-master's degree experience. This subdivision takes effect January 1, 2006.
(G) If a psychologist described in subparagraph (E) of this paragraph is unavailable, the applicant may seek the approval of the board for supervision by a limited licensed psychologist, a person who has been granted a master's degree in psychology and who has acquired not less than 3 years (6,000 clock hours) of post-master's degree experience in the practice of psychology, or another individual approved by the board.

R 338.2507a Application for temporary limited license for post-master's degree experience.
Rule 7a. (1) The board shall issue a temporary limited license for post-master's degree experience to an applicant who meets the following requirements:

(a) Has completed educational requirements as provided in these rules.
(b) Has completed training requirements as provided in these rules.
(c) Has made appropriate arrangements for supervision by a psychologist as provided in these rules. The arrangements shall provide for individual, in person meetings between the applicant and his or her supervisor for a minimum of 4 hours a month during the 2,000 clock hours of post-master's degree experience. This subdivision takes effect January 1, 2006.
(2) A temporary limited license is valid for 2 years.

R 338.2510 Application for limited license pursuant to MCL 333.18212(2); eligibility requirements.
Rule 10. (1) To be eligible for a limited license for postdoctoral training and experience under section 18212(2) of the code, an individual shall have been granted a doctoral degree which meets the requirements of R 338.2506(a).
(2) An individual granted a limited license for postdoctoral training and experience shall be supervised by a licensed psychologist in an organized health care setting or other arrangement that is approved by the board. The limited licensee shall meet individually and in person with his or her supervisor weekly for a minimum of 4 hours a month, during which all active work functions and records of the individual are reviewed. In cases of extreme hardship, the limited licensee may request an alternative supervision arrangement. The board shall approve the alternative supervision arrangement before the arrangement is implemented. Such training and experience shall occur in an organized health care setting, as defined in R 338.2501(1)(b), or other arrangement receiving approval of the board. This subdivision takes effect January 1, 2006.

R 338. 2510a Supervision requirements; reporting of supervision.
Rule 10a. (1) An individual who is granted a limited license under section 18223(2) of the code and is required to be supervised by a licensed psychologist shall meet all of the following requirements:
(a) A licensee who has less than 10 years of experience as a limited licensed psychologist, excluding experience as a temporary limited licensed psychologist, shall meet individually and in person with his or her supervisor for a minimum of 2 hours a month.
(b) A licensee who has 10 or more years of experience as a limited licensed psychologist, excluding experience as a temporary limited licensed psychologist, shall meet individually and in person with his or her supervisor for a minimum of 1 hour a month.
(2) When renewing a limited license, a limited licensed psychologist shall report on the license renewal form the name, address, telephone number, and license number of his or her supervisor. The licensee also shall report the starting date of the supervision. This subdivision takes effect with the 2006 renewal cycle.
(3) When renewing a license, a licensed psychologist who is supervising a limited licensed psychologist shall report on the license renewal form the name, address, telephone number, and license number of each limited licensed psychologist that he or she supervises. The licensee shall also report the starting date of the supervision. This subdivision takes effect with the 2006 renewal cycle.

## ADMINISTRATIVE RULES

SOAHR 2004-049

DEPARTMENT OF COMMUNITY HEALTH

BUREAU OF EPIDEMIOLOGY
DIVISION OF ENVIRONMENTAL AND OCCUPATIONAL EPIDEMIOLOGY

HEAVY METAL AND PESTICIDE ANALYSIS REPORTING

Filed with the Secretary of State on September 23, 2005
These rules take effect immediately after filing with the Secretary of State

(By authority conferred on the director of the department of community health by sections 5111 and 2226(d) of 1978 PA 368, section 8 of 1978 PA 312, and Executive Reorganization Order Nos. 1996-1 and 1997-4, MCL 333.5111, 333.2226(d), 325.78, 330.3101, and 333.26324)

R 325.61 to R 325.68 are added to the Michigan Administrative Code as follows:

R 325.61 Definitions.
Rule 1. (1) As used in these rules:
(a) "Heavy metal analysis report form" means the form used to report the required reportable information for blood and urine that has been analyzed for arsenic, cadmium, or mercury.
(b) “Pesticide poisoning report form” means the form used to report the required reportable information for blood that has been analyzed for acetylcholinesterase or pseudocholinesterase.
(c) “Pesticide” means any substance or mixture of substances including inert ingredients and adjuvants used to prevent, destroy, mitigate, or repel any pest. Pesticides include, but are not limited to, insecticides, herbicides, fungicides, rodenticides, repellents, fumigants, wood treatment products, and disinfectants.
(d) "Department" means the Michigan department of community health.
(e) "Physician/provider" means a person who is licensed under Article 15 of the public health code MCL 333.16101 to 333.18838 who provides health care services and who is authorized to request the analysis of blood and urine specimens.

R 325.62 Reportable information.
Rule 2. (1) Reportable information is specifically related to blood and urine samples submitted to clinical laboratories for analysis.
(2) Upon initiating a request for analysis of arsenic, cadmium, mercury, acetylcholinesterase, or pseudocholinesterase, the physician/provider ordering the analysis shall complete the client information (section I) and the physician/provider information (section II) of a heavy metal analysis report form or pesticide poisoning report form designated by the department. Or, the physician/provider shall complete a similar form that ensures the inclusion of the same required data and provide all of the following information:
(a) All of the following information with respect to the individual tested:
(i) Name.
(ii) Sex, if available.

(iii) Race, if available.
(iv) Ethnic group, if available.
(v) Birthdate or age.
(vi) Address.
(vii) Telephone number.
(viii) If the individual is a minor, then the name of a parent or guardian.
(ix) If the individual is an adult, then the name and address of his or her employer, if available.
(b) The date the sample was collected.
(3) The heavy metal analysis report form or pesticide poisoning analysis report form, or a document with the same data, shall be submitted with the sample for analysis to a clinical laboratory that performs the analysis.
(4) Upon receipt of the blood or urine sample for analysis, the clinical laboratory shall complete the laboratory information (section III) and provide all of the information required and/or submitted by the physician/provider along with all of the following:
(a) The name, address, and phone number of the laboratory.
(b) The date of analysis.
(c) The results of the analysis. All values, normal and abnormal, shall be reported. For arsenic, blood levels shall be reported in micrograms per milliliter (μg/ml) and urine levels in micrograms per liter (μg/L). For cadmium, blood levels shall be reported as micrograms per liter (μg/L) of whole blood and urine tests shall be reported as micrograms per gram of creatinine (μg/gram creatinine) or micrograms per liter (μg/L). Mercury shall be reported as nanograms per milliliter of blood (ng/ml) and micrograms per liter (μg/L) of urine. Acetylcholinesterase shall be reported as units per gram of hemoglobin (U/g hemoglobin), and the laboratory normal range shall be included. Pseudocholinesterase levels shall be reported as units per liter (U/L) of plasma, and the laboratory normal range shall be included. Alternate units will be accepted for reporting purposes, as approved by the department.

R 325.63 Reporting responsibilities.
Rule 3. (1) All clinical laboratories doing business in this state that analyze blood or urine samples for arsenic, cadmium, mercury, acetylcholinesterase, or pseudocholinesterase shall report all results to the department of community health, bureau of epidemiology, division of occupational and environmental epidemiology, 3423 N. Martin Luther King Jr. Blvd., Lansing, MI 48909. Reports shall be made within 5 working days after test completion.
(2) Nothing in this rule shall be construed to relieve a laboratory from reporting results of a blood or urine analysis for arsenic, cadmium, mercury, acetylcholinesterase, or pseudocholinesterase to the physician or other health care provider who ordered the test or to any other entity as required by state, federal, or local statutes or regulations or in accordance with accepted standard of practice, except that reporting in compliance with this rule satisfies the reporting requirements of 1978 PA 368, MCL 333.1101.

R 325.64 Electronic communications.
Rule 4. (1) A clinical laboratory may submit the data required in R 325.62 electronically to the department.
(2) For electronic reporting, upon mutual agreement between the reporting laboratory and the department, the reporting shall utilize the data format specifications provided by the department.

R 325.65 Investigation and quality assurance.

Rule 5. (1) The department, upon receiving a report under R 325.63 may investigate to determine the accuracy of the report, patient's source of exposure, and adverse health effects resulting from the exposure.
(2) Requests for individual medical and epidemiologic information to validate the completeness and accuracy of reporting are specifically authorized.
(3) The copies of the medical records shall not be recopied by the department and shall be kept in a locked file cabinet when not in use.
(4) Reports may be released to other state, local, or federal agencies for those agencies to administer and enforce provisions of laws or rules to protect individuals from exposure to hazardous levels of arsenic, mercury, cadmium, or pesticides. Confidential information may be released to another governmental agency only after execution of a signed interagency agreement assuring that the other agency will abide by the confidentiality requirements of R 325.66.
(5) Nothing in this rule shall be construed to relieve or preempt any other entities from investigating hazards associated with these substances under state, federal, or local statutes or regulations.

R 325.66 Confidentiality of reports.
Rule 6. (1) Reports submitted to the department under R 325.63 are not public records and are exempt from disclosure pursuant to the freedom of information act, 1976 PA 442, MCL 15.243, section 13(1)(d).
(2) The department shall maintain the confidentiality of all reports of all tests submitted to the department and shall not release reports or any information that may be used to directly link the information to a particular individual, unless the department has received written consent from the individual, or from the individual's parent or legal guardian, requesting the release of information.
(3) Medical and epidemiological information that is released to a legislative body shall not contain information that identifies a specific individual. Aggregate epidemiological information concerning the public health that is released to the public for informational purposes only shall not contain information that identifies a specific individual.

R 325.67 Heavy metal analysis report form.
Rule 7. The heavy metal analysis report form reads as follows:

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
HEAVY METAL ANALYSIS REPORT
DATA/INFORMATION REQUIRED BY ADMINISTRATIVE RULE R 325.62

I. CLIENT INFORMATION

Last name First name M.I.

Sex (M/F) Race (White/Black/Asian/Pacific Islander/American Indian/Alaskan/mixed)

Ethnicity (Hispanic Y/N) Birth date or age Phone number

Street address City State/Zip Code/County

Name of parent or guardian if individual is a minor

Employer name (if adult)

Employer street address City State/Zip Code

II. PHYSICIAN/PROVIDER INFORMATION

(_____)
Provider last name First name Phone number

Provider street address City State/Zip Code

III. LABORATORY INFORMATION

(_____)
Name of testing laboratory Phone number

Laboratory street address City State/Zip Code

Date sample taken Date sample analyzed

Results

| Sample | Arsenic | Cadmium | Mercury |
|---|---|---|---|
| Blood | _____ µg/ml | _____ µg/L | _____ ng/ml |
| Urine<br>OR<br>µg/L | _____ µg/L | _____ µg/gram creatinine | _____ µg/L |

MDCH – Bureau of Epidemiology, Division of Occupational and Environmental Epidemiology 3423 N. M.L. King, Jr. Blvd., Lansing, MI 48909 • Fax Number (517) 335-9775 • Phone number (517) 335-8350

R 325.68 Pesticide poisoning analysis report form.
Rule 8. The pesticide poisoning report form reads as follows:

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
PESTICIDE POISONING REPORT
DATA/INFORMATION REQUIRED BY ADMINISTRATIVE RULE R 325.62

I. CLIENT INFORMATION

Last name First name M.I.

Sex (M/F) Race (White/Black/Asian/Pacific Islander/American Indian/Alaskan/mixed)

(_____)
Ethnicity (Hispanic Y/N) Birth date Phone number

Street address City State/Zip Code/County

Name and address of parent or guardian if individual is a minor

Employer

Employer street address City State/Zip Code/County

II. PHYSICIAN/PROVIDER INFORMATION

(_____)
Provider last name First name Phone number

Name of medical facility of requesting physician/provider

Facility street address City State/Zip Code

III. LABORATORY INFORMATION

(_____)
Name of testing laboratory Phone number

Laboratory street address City State/Zip Code

Date sample taken Date sample analyzed

Results

| Test | | Laboratory normal range |
|---|---|---|
| Acetylcholinesterase | _____ U/g hemoglobin | _____ - _____ U/g hemoglobin |
| Pseudocholinesterase | _____ U/L | _____ - _____ U/L |

MDCH – Bureau of Epidemiology, Division of Occupational and Environmental Epidemiology 3423 N. M.L. King, Jr. Blvd., Lansing, MI 48909 • Fax Number (517) 335-9775 • Phone number (517) 335-8350

## ADMINISTRATIVE RULES

SOAHR 2005-002

DEPARTMENT OF COMMUNITY HEALTH

BUREAU OF EPIDEMIOLOGY

COMMUNICABLE AND RELATED DISEASES

Filed with the Secretary of State on September 23, 2005
These rules take effect immediately after filing with the Secretary of State

(By authority conferred on the director of the department of community health by sections 5111 and 9227 of 1978 PA 368 and Executive Reorganization Order Nos. 1996-1 and 1997-4, MCL 333.5111, 333.9227, 330.3101, and 333.26324)

R 325.172 and R 325.173 are amended as follows:

R 325.172 Designation and classification of diseases and infections.
Rule 2. (1) All of the following conditions are designated as serious communicable diseases:
(a) Acquired immunodeficiency syndrome (AIDS).
(b) Amebiasis.
(c) Anthrax.
(d) Arboviral Disease (includes West Nile virus, Eastern equine encephalitis, St. Louis encephalitis, California-group (Lacrosse encephalitis).
(e) Aseptic (viral) meningitis.
(f) Avian Influenza
(g) Blastomycosis.
(h) Botulism.
(i) Brucellosis.
(j) Campylobacter enteritis.
(k) Chancroid.
(l) Chickenpox (Varicella).
(m) Chlamydial disease, genital.
(n) Cholera.
(o) Coccidioidomycosis.
(p) Cryptococcosis.
(q) Cryptosporidiosis.
(r) Cyclosporiasis.
(s) Dengue fever.
(t) Diphtheria.
(u) Ehrlichiosis.
(v) Encephalitis, viral.
(w) Escherichia coli, Shiga toxin positive - serotype O157:H7 and others.
(x) Giardiasis
(y) Glanders

(z) Gonorrhea
(aa) Granuloma inguinale (Donovanosis)
(bb) Haemophilus influenzae disease, meningitis, or epiglottitis.
(cc) Hantavirus pulmonary syndrome.
(dd) Hemolytic-Uremic syndrome (HUS), postdiarrheal.
(ee) Hepatitis A.
(ff) Hepatitis B
(gg) Hepatitis C.
(hh) Hepatitis, viral non-A ,B, C.
(ii) Histoplasmosis.
(jj) Human immunodeficiency virus (HIV).
(kk) Influenza.
(ll) Legionellosis.
(mm) Leprosy.
(nn) Leptospirosis.
(oo) Listeriosis.
(pp) Lyme disease.
(qq) Lymphogranuloma venereum.
(rr) Malaria.
(ss) Measles (Rubeola).
(tt) Meningococcal disease, meningitis, or meningococcemia.
(uu) Meningitis, other bacterial.
(vv) Mumps.
(ww) Orthopox virus (includes smallpox and Monkeypox).
(xx) Pertussis.
(yy) Plague.
(zz) Poliomyelitis, paralytic.
(aaa) Psittacosis.
(bbb) Q fever.
(ccc) Rabies, human.
(ddd) Rickettsial disease.
(eee) Rocky Mountain spotted fever.
(ggg) Rubella.
(hhh) Rubella syndrome, congenital.
(iii) Salmonellosis.
(jjj)Severe Acute Respiratory Syndrome (SARS).
(kkk) Shigellosis.
(lll) Spongioform encephalopathy (includes Creutzfeldt-Jakob disease).
(mmm) Staphylococcus aureus infections, vancomycin intermediate/resistant (VISA/VRSA).
(nnn) Staphylococcus aureus infections methicillin resistant (MRSA) (outbreaks only).
(ooo) Streptococcus pneumoniae infections, sterile sites, susceptible/resistant.
(ppp) Streptococcal infections, Streptococcus pyogenes group A, sterile sites.
(qqq) Syphilis.
(rrr) Tetanus.
(sss) Trachoma.
(ttt) Trichinosis.
(uuu) Tuberculosis.
(vvv) Tularemia.

(www) Typhoid fever.
(xxx) Typhus.
(yyy) Viral hemorrhagic fevers, (includes Lassa fever and Congo Crimean hemorrhagic fever).
(zzz) Yellow fever.
(aaaa) Yersinia enteritis.
(bbbb) The unusual occurrence, outbreak, or epidemic of any condition, including healthcare-associated infections.
(2) All of the following are designated as serious infections if a laboratory confirms their presence in an individual:
(a) Arbovirus.
(b) Avian influenza virus.
(c) Bacillus anthracis.
(d) Bordetella pertussis.
(e) Borrelia burgdorferi.
(f) Brucella species.
(g) Calymmatobacterium granulomatis.
(h) Campylobacter species.
(i) Chlamydia psittaci.
(j) Chlamydia trachomatis.
(k) Clostridium botulinum.
(l) Clostridium tetani.
(m) Coccidiodes immitis.
(n) Corynebacterium diphtheriae.
(o) Coxiella burnetii.
(p) Cryptococcus neoformans.
(q) Cryptosporidium species.
(r) Cyclospora species.
(s) Dengue Virus.
(t) Ehrlichia species.
(u) Encephalitis (viral).
(v) Entamoeba histolytica.
(w) Escherichia coli, shiga toxin positive - serotype O157:H7 and others.
(x) Francisella tularensis.
(y) Giardia lamblia.
(z) Haemophilus ducreyi.
(aa) Haemophilus influenzae type B.
(bb) Hantavirus.
(cc) Hemorrhagic fever viruses.
(dd) Hepatitis A, IgM.
(ee) Hepatitis B surface antigen.
(ff) HIV (Confirmed positive HIV serology and detection tests; CD4 counts/percents and all viral loads on people already known to be infected).
(gg)Histoplasma capsulatum.
(hh) Influenza virus.
(ii) Legionella species.
(jj) Leptospira species.
(kk) Listeria monocytogenes.

(ll) Meningitis, other bacterial.
(mm) Measles (Rubeola) virus.
(nn) Mumps virus.
(oo) Mycobacterium bovis.
(pp) Mycobacterium leprae.
(qq) Mycobacterium tuberculosis.
(rr) Neisseria gonorrhoeae.
(ss) Neisseria meningitidis.
(tt) Orthopox viruses.
(uu) Plasmodium species.
(vv) Poliovirus.
(ww) Rabies virus.
(xx) Rickettsia ricketsii.
(yy) Rickettsia species.
(zz) Rubella virus.
(aaa) Salmonella species.
(bbb) SARS coronavirus.
(ccc) Shigella species.
(ddd) Spongioform encephalopathy (includes Creutzfeldt-Jakob disease).
(eee) Staphylococcus aureus, vancomycin intermediate/resistant VISA/VRSA.
(fff) Staphylococcus aureus, methicillin resistant – outbreak only.
(ggg) Streptococcus pneumoniae, sterile sites, susceptible/resistant.
(hhh) Streptococcus pyogenes invasive, group A, sterile sites.
(iii) Treponema pallidum.
(jjj) Trichinella spiralis.
(kkk) Varicella virus (Chickenpox).
(lll) Vibrio cholera serovar 01.
(mmm) Yellow fever virus.
(nnn) Yersinia enterocolitica.
(ooo) Yersinia pestis.
(ppp) The unusual occurrence, outbreak, or epidemic of any infection.
(3) All of the following conditions are designated as noncommunicable diseases:
(a) Guillain-Barre syndrome.
(b) Kawasaki disease.
(c) Reye's syndrome.
(d) Rheumatic fever.
(e) Toxic shock syndrome.

R 325.173 Reporting and surveillance requirements.

Rule 3. (1) A physician shall report each case of a serious communicable disease specified in R 325.172, except for human immunodeficiency virus infection and acquired immunodeficiency syndrome which are governed by MCL 333.5114, within 24 hours of diagnosis or discovery, to the appropriate health department.

(2) A physician shall report the unusual occurrence of any disease, infection, or condition that threatens the health of the public, within 24 hours of diagnosis or discovery, to the appropriate local health department.

(3) A physician shall report noncommunicable diseases specified in R 325.172 within 3 days of diagnosis or discovery, to the appropriate local health department.

(4) A physician is authorized to report any disease, infection, or condition that is not included in subrule (1), (2), or (3) of this rule to the appropriate local health department according to the physician's medical judgment.

(5) A clinical laboratory shall report, within 24 hours of discovery, both of the following to the appropriate local health department:

(a) Laboratory evidence of any serious infection specified in R 325.172 except for human immunodeficiency virus which is governed by MCL 333.5114.

(b) Laboratory evidence of any other disease, infection, or condition that is judged by the laboratory director to indicate that the health of the public is threatened. A laboratory in this state that receives or processes specimens to be tested for the listed agents shall report a result confirming presence of a listed agent, even if the testing is not done on-site, for example, the specimen is shipped to a reference laboratory for testing.

(6) When a physician or clinical laboratory suspects the presence of a designated condition, but does not have sufficient information to confirm its presence, the physician or laboratory shall report the designated condition as suspect to the appropriate local health department. Upon confirmation of the designated condition, a physician or laboratory shall report the condition as confirmed to the appropriate local health department.

(7) A health facility infection control committee shall develop policies and procedures to ensure the appropriate reporting of designated conditions by physicians who treat individuals at that facility and by clinical laboratories at that facility.

(8) All of the following individuals are authorized to report to the appropriate local health department any designated condition or any other disease, infection, or condition which comes to their professional attention and which poses a threat to the health of the public:

(a) An administrator, epidemiologist, or infection control professional from a health care facility or other institution.

(b) A dentist.

(c) A nurse.

(d) A pharmacist.

(e) A physician's assistant.

(f) A veterinarian.

(g) Any other health care professional.

(9) Within 24 hours of suspecting any of the following, a primary or secondary school, child daycare center, or camp shall report both of the following to the appropriate local health department:

(a) The occurrence among those in attendance of any of the serious communicable diseases specified in R 325.172, except for human immunodeficiency virus and acquired immunodeficiency syndrome which are governed by MCL 333.5131.

(b) The unusual occurrence, outbreak, or epidemic among those in attendance of any disease, infection, or condition.

(10) A report shall be directed to the appropriate local health department. A report may be written, oral, or transmitted by electronic media. A report shall be transmitted in a manner prescribed or approved by the appropriate local health department.

(11) Except as provided in subrules (13) and (14) of this rule, and except for human immunodeficiency virus and acquired immunodeficiency syndrome which are governed by MCL 333.5114, a required report by a physician shall contain all of the following information:

(a) The patient's full name.

(b) The patient's residential address, including street, city, village or township, county, and zip code.

(c) The patient's telephone number.

(d) The patient's date of birth, age, sex, race, and ethnic origin.

(e) The name of the disease, infection, or condition reported.
(f) The estimated date of the onset of the disease, infection, or condition, where applicable.
(g) The identity of the reporting person.
(h) Pertinent laboratory results.
(i) Any other information considered by the physician to be related to the health of the public.

(12) Acquired immunodeficiency syndrome (AIDS), human immunodeficiency virus (HIV) infection, tuberculosis, and venereal disease shall be reported by completing forms provided by the department. Information on what is to be reported and methods of reporting for human immunodeficiency virus and acquired immunodeficiency syndrome are governed by MCL 333.5114.

(13) Viral influenza need only be reported by the number of cases identified during a specified time period.

(14) A required report by a clinical laboratory shall contain all of the following information, except for human immunodeficiency virus and acquired immunodeficiency syndrome, which are governed by MCL 333.5114:

(a) The patient's full name.
(b) The patient's residential address, including street, city, village or township, county, and zip code.
(c) The patient's telephone number.
(d) The patient's date of birth or age.
(e) The patient's sex.
(f) The specific laboratory test, date performed, and the results.
(g) The name and address of the reporting clinical laboratory.
(h) The name, address, and telephone number of the ordering person.

(15) To the extent that the information is readily available, a report of an unusual occurrence, outbreak, or epidemic of a disease, infection, or other condition include all of the following information:

(a) The nature of the confirmed or suspected disease, infection, or condition.
(b) The approximate number of cases.
(c) The approximate illness onset dates.
(d) The location of the outbreak.

(16) Within 24 hours of receiving a report, a local health department shall communicate the report of an individual who has a serious communicable disease specified in R 325.172 or a serious infection specified in R 325.172 to the department and any other Michigan jurisdiction if the individual resides in that other jurisdiction.

(17) Within 3 days of receiving a report, a local health department shall communicate the report of an individual who has a noncommunicable disease specified in R 325.172 to the department and another Michigan jurisdiction if the individual resides in that other jurisdiction.

(18) Within 24 hours of receiving a report that concerns an individual who resides outside of Michigan, a local health department shall forward the report to the department.

(19) Reports of designated conditions acquired by residents of a local health department’s jurisdiction shall be recorded by the local health officer and shall be forwarded to the department in a format specified by the department.

## ADMINISTRATIVE RULES

SOARH 2005-027

DEPARTMENT OF EDUCATION

SUPERINTENDENT OF PUBLIC INSTRUCTION

TEACHERS' TENURE

Filed with the Secretary of State on September 23, 2005
These rules take effect immediately upon filing with the Secretary of State

(By authority conferred on the superintendent of public instruction by section 2 of 1937 PA 4, MCL 38.72, section 15 of 1964 PA 287, MCL 388.1015 and Executive Reorganization Order Nos. 1996-6 and 1996-7, MCL 388.993 and MCL 388.994)

R 390.661 of the Michigan Administrative Code is amended, as follows:

R 390.661 Certification of teachers under teachers' tenure act.
Rule 1. (1) For the purposes of teacher tenure under the provisions of article II of 1937 PA 4, MCL 38.81 to 38.84, "certificated," as it refers to teachers, shall include any teacher who holds a Michigan teaching certificate, as defined by R 390.1101, which is valid for the position to which he or she is assigned, or any teacher employed in a school guidance counselor position holding any Michigan teaching certificate with a school guidance counselor endorsement, but shall not include nondegreed persons who hold special certificates as teachers or teacher aides in training in experimental programs.
(2) For the purposes of article III of 1937 PA 4, MCL 38.91 to 38.92, "certificated" shall include any teacher who holds a Michigan teaching certificate as defined by R 390.1101, but shall not include nondegreed persons who hold special certificates as teachers or teacher aides in training in experimental programs.

## PROPOSED ADMINISTRATIVE RULES, NOTICES OF PUBLIC HEARINGS

*MCL 24.242(3) states in part:*

*"... the agency shall submit a copy of the notice of public hearing to the State Office of Administrative Hearings and Rules for publication in the Michigan register. An agency's notice shall be published in the Michigan register before the public hearing and the agency shall file a copy of the notice of public hearing with the State Office of Administrative Hearings and Rules."*

*MCL 24.208 states in part:*

*"Sec. 8. (1) The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:*

* * *

*(d) Proposed administrative rules.*

*(e) Notices of public hearings on proposed administrative rules."*

## PROPOSED ADMINISTRATIVE RULES

SOARH 2005-028

DEPARTMENT OF COMMUNITY HEALTH

DIRECTOR'S OFFICE

DENTISTRY RULES - GENERAL RULES

Filed with the Secretary of State on

These rules become effective immediately upon filing with the Secretary of State unless adopted under sections 33, 44, or 45a(6) of 1969 PA 306. Rules adopted under these sections become effective 7 days after filing with the Secretary of State.

*(By authority conferred on the director of the department of community health by ~~section~~ **sections 16145(3) and** 16601 of 1978 PA 368, ~~MCL 333.16601 et seq.~~ **MCL 333.16145(3) and 333.16601 et seq.** and Executive Reorganization Order Nos. 1996-1, 1996-2 and ~~2003-18~~ **2003-1**, MCL 330.3101, 445.2001 and 445.2011)*

**R 338.11101, R 338.11201, R 338.11202, R 338.11203, R 338.11221, R 338.11222, R 338.11223, R 338.11247, R 338.11255, R 338.11259, R 338.11261, R 338.11301, R 338.11303, R 338.11307, R 338.11403, R 338.11405, R 338.11406, R 338.11408, R 338.11603, R 338.11701, R 338.11704a, and R 338.11705 are amended and R 338. 11404, R 338.11405a, R 338.11409, and R 338.11605 are added to the Michigan Administrative Code as follows:**

PART 1. GENERAL PROVISIONS

R 338.11101 Definitions.

Rule 1101. As used in these rules:

(a) "Act" means ~~Act No. 368 of the Public Acts of 1978, as amended, being §~~ **1978 PA 368, MCL** 333.1101**.** ~~et seq. of the Michigan Compiled Laws.~~

(b) "Analgesia" means the diminution or elimination of pain in the conscious patient.

**(c ) "Anxiolysis" means the relief of fear or anxiety through the use of pharmacologic or non-pharmacologic anxiety reduction techniques.**

**(d) "Approved course" means a course offered by either a dental, dental hygiene, or dental assisting program accredited by the**



**commission on dental accreditation of the American dental association and approved by the department, or as defined in section 16611 of the act.**

~~(c)~~ **(e)** "Assignment" means that a dentist has designated a patient of record upon whom services are to be performed by an assistant, registered dental assistant, or registered dental hygienist and has

described the procedure to be performed. The dentist need not be physically present in the office or in the treatment room at the time the procedures are being performed.

~~(d)~~ **(f)** "Assistant" means a nonlicensed person who may perform basic supportive procedures under the supervision of a dentist as provided in these rules.

~~(e)~~ **(g)** "Board" means the Michigan board of dentistry.

**(h) "Conscious sedation" means a minimally depressed level of consciousness that retains a patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command and that is produced by a pharmacological or a non-pharmacological method or a combination of both.**

**(i) "Combination inhalation-enteral conscious sedation" means conscious sedation using inhalation and enteral agents. If the intent is anxiolysis only, and the appropriate dosage of agents is administered, then the definition of enteral and/or combination inhalation-enteral conscious sedation (combined conscious sedation) does not apply. Nitrous oxide/oxygen when used in combination with sedative agents may produce anxiolysis, conscious or deep sedation, or general anesthesia.**

**(j) "Dental school" means an institution that offers a curriculum that provides a core of required dental education, training, and experience, and includes at least 4 years of academic instruction or its equivalent leading to the degree of doctor of dental surgery or doctor of dental medicine. The dental school is a component of an institution of higher education that is accredited by an agency recognized by the United States department of education and that the American dental association's commission on dental accreditation has accredited as a dental education program.**

~~(f)~~ **(k)** "Dentist" means a person licensed by the board ~~pursuant to~~ **under** the act and these rules.

~~(g)~~ **(l)** "Direct supervision" means that a dentist has designated a patient of record upon whom services are to be performed by an assistant, registered dental assistant, or registered dental hygienist and has described the procedures to be performed. The dentist shall examine the patient before prescribing the procedure to be performed and again upon completion of the procedure. The dentist shall be physically present in the office at the time the procedures are being performed.

**(m) "Enteral" means any technique of administration in which the agent is absorbed through the gastrointestinal or oral mucosa.**

~~(h)~~ **(n)** "General anesthesia" means the elimination of all sensations accompanied by a state of unconsciousness and loss of reflexes necessary to maintain a patient airway.

~~(i)~~ **(o)** "General supervision" means that a dentist has designated a patient of record upon whom services are to be performed. The dentist shall be physically present in the office at the time the procedures are being performed.

~~(j)~~ **(p)** "Licensed" means the possession of a full license to practice, unless otherwise stated.

~~(k)~~ **(q)** "Local anesthesia" means the elimination of sensation, especially pain, in ~~a~~ **one** part of the body by the topical application or regional injection of a drug.

~~(l)~~ **(r)** "Office" means the building or suite in which dental treatment is performed.

**(s) "Parenteral" means a technique of administration in which the drug bypasses the gastrointestinal (gi) tract, such as intramuscular (im), intravenous (iv), intranasal (in), submucosal (sm), subcutaneous (sc), and intraocular (io).**

~~(m)~~ **(t)** "Patient of record" means a patient who has been examined and diagnosed by a licensed dentist and whose treatment has been planned by a licensed dentist.

~~(n)~~ **(u)** "Public health service" means the United States public health service. A person applying for an exemption under this classification shall submit a certified copy of his or her official papers verifying active duty status.

~~(o)~~ **(v)** "Registered dental assistant" means a person licensed by the board ~~pursuant to~~ **under** the act and these rules. A dental hygienist may perform the functions of a registered dental assistant if he or she is licensed by the board as a registered dental assistant.

~~(p)~~ **(w)** "Registered dental hygienist" means a person licensed by the board ~~pursuant to~~ **under** the act and these rules.

~~(q)~~ **(x)** "Second pair of hands," as used in R 338.11109, means acts, tasks, functions, and procedures performed by a dental assistant, registered dental assistant, or registered dental hygienist at the direction of a dentist who is in the process of rendering dental services and treatment to a patient. The acts, tasks, functions, and procedures performed by a dental assistant, registered dental assistant, or registered dental hygienist are ancillary to the procedures performed by the dentist and intended to provide help and assistance at the time the procedures are performed. This definition shall not be deemed to expand the duties of the dental assistant, registered dental assistant, or registered dental hygienist as provided by the act and rules promulgated by the board.

~~(r)~~ **(y)** "Sedation" means the calming of a nervous, apprehensive individual, without inducing loss of consciousness, through the use of systemic drugs. Agents may be given orally, parenterally, or by inhalation.

**(z) "Titration" means the administration of small incremental doses of a drug until a desired clinical effect is observed. In accordance with this definition, titration of oral medication for the purposes of sedation is unpredictable. Repeated dosing of orally administered sedative agents may result in an alteration of the state of consciousness beyond the intent of the practitioner. The maximum recommended dose (mrd) of an oral medication shall not be exceeded. Facilities, personnel and standards for enteral sedation are the same as those for parenteral sedation.**

~~(s)~~ **(aa)** "Treatment room" means the particular room or specific area in which the dental treatment is performed upon a patient.

## PART 2. LICENSURE

R 338.11201 Licensure by examination to practice dentistry; graduates of schools in compliance with board standards.

Rule 1201. An applicant for dentist licensure by examination shall submit a completed application on a form provided by the department, together with the requisite fee. In addition to meeting the requirements of the code and administrative rules promulgated under the code, an applicant for dentist licensure by examination shall meet all of the following requirements:

(a) Graduate from a dental school that is in compliance with the standards ~~set forth~~ in R 338.11301.

(b) Pass all parts of the national board examination that is conducted and scored by the joint commission ~~of~~ **on** national dental ~~examiners,~~ **examinations in order** to qualify for the licensing examination provided in subdivision (c) of this rule. The requirement does not apply to applicants who have graduated before 1950.

(c) ~~Pass the combined regional examination in dentistry that is conducted and scored by the northeast regional board of dental examiners, incorporated.~~ **Pass a dental simulated clinical**

**written examination that is conducted and scored by the northeast regional board of dental examiners, incorporated, or a successor organization, and 1 of the following:**

**(i) Pass all parts of a clinical examination that is conducted and scored by the north east regional board of dental examiners, incorporated, or a successor organization, or pass all parts of a clinical examination that is conducted by a regional testing agency that is approved by the board.**

**(ii) Pass all parts of a clinical examination developed and scored by a state or other entity and that is substantially equivalent, as provided in R 338.11203(5), to the clinical examination of the north east regional board of dental examiners, incorporated, or a successor organization.**

R 338.11202 Licensure to practice dentistry; graduates of school not meeting board standards; requirements.

Rule 1202. An individual who graduated from a school of dentistry that ~~is not in compliance~~ **does not comply** with the standards provided in R 338.11301 may be licensed by the board if the individual meets all of the following requirements:

(a) Complies with section 16174 of the act.

(b) Presents to the board a final, official transcript establishing graduation from a school in which he or she has obtained a dental degree. ~~If the transcript is issued in a language other than English, an original, official translation shall also be submitted.~~

(c) Successfully completes a minimum 2-year **predoctoral general dentistry** program in a dental school that ~~is in compliance~~ **complies** with the standards ~~set forth~~ in R 338.11301 and **that leads to the awarding of a degree in dentistry. The completion of the program shall be** ~~the individual~~ ~~is~~ confirmed by the dean of the school attended. **Postgraduate programs or residency programs in specialty fields are not acceptable.**

(d) Passes all parts of the national board examination that is conducted and scored by the joint commission ~~of~~ **on** national dental ~~examiners~~ **examinations**.

(e) ~~Passes the combined regional examination in dentistry that is conducted and scored by the northeast regional board of dental examiners, incorporated.~~ **Passes the dental simulated clinical written examination and a clinical examination, as described in R 338.11201(c).**

R 338.11203 Dental examinations; required passing scores.

Rule 1203. (1) The board approves and adopts the examination developed and scored by the joint commission on national dental examinations. ~~A passing score on the examination shall be~~ **An applicant shall present evidence of passing each component of the examination with** a converted score of not less than 75 on each part.

(2) The board approves and adopts the **dental simulated clinical-written** examination developed and scored by the ~~northeast~~ **north east** regional board of dental examiners, incorporated, **or a successor organization**. ~~A passing score on the examination shall be~~ **An applicant shall present evidence of passing each component of the examination with** a converted score of not less than 75 on each part of the examination.

**(3) The board approves and adopts the clinical examination developed and scored by the north east regional board of dental examiners, incorporated. A passing score on the clinical examination shall be the score recommended by the north east regional board of dental examiners, incorporated, or its successor organization. An applicant shall present evidence of passing each component of the examination with a converted score of not less than 75.**

**(4) The board approves and adopts the clinical examinations of other regional testing agencies or state boards if the examinations are considered to be substantially equivalent to the clinical examination of the north east regional board of dental examiners, incorporated. A passing score on the clinical examination shall be the score recommended by the sponsoring organization. An applicant shall present evidence of passing each component of the examination with a converted score of not less than 75.**

**(5) To determine substantial equivalency as specified in subrule (4) of this rule, the board shall consider factors such as the following:**

**(a) Subject areas included.**

**(b) Detail of material.**

**(c) Comprehensiveness.**

**(d) Length of an examination.**

**(e) Degree of difficulty.**

**(6) To demonstrate substantial equivalency as specified in subrule (4) of this rule, an applicant may be required to submit, or cause to be submitted, materials such as the following:**

**(a) A copy of the examination booklet or description of the examination content and examination scores issued by the testing agency.**

**(b) An affidavit from the appropriate state licensing agency that describes the examination and sets forth the legal standards which were in effect at the time of the examination.**

**(c) An affidavit from a state licensing board or examination agency that describes the examination.**

R 338.11221 Licensure by examination to practice dental hygiene; requirements; graduates of schools in compliance with board standards.

Rule 1221. An applicant for dental hygienist licensure by examination shall submit a completed application on a form provided by the department, together with the requisite fee. In addition to meeting the requirements of the code and administrative rules promulgated under the code, an applicant for dental hygienist licensure by examination shall meet all of the following requirements:

(a) Graduate from a dental hygiene program in compliance with the standards ~~set forth~~ in R 338.11303.

(b) Pass all parts of the dental hygiene national board examination that is conducted and scored by the joint commission ~~of~~ **on** national dental ~~examiners~~ **examinations** in order to qualify for the licensing examination provided for in subdivision (c) of this rule. The requirement does not apply to applicants who have graduated before 1962.

(c) ~~Pass the combined regional dental hygiene examination that is conducted and scored by the northeast regional board of dental examiners, incorporated.~~ **Pass a dental hygiene simulated clinical written examination conducted and scored by the north east regional board of dental examiners, incorporated, or a successor organization, and 1 of the following:**

**(i) Pass all parts of a clinical examination that is conducted and scored by the north east regional board of dental examiners, incorporated, or a successor organization or pass all parts of a clinical examination that is conducted by a regional testing agency approved by the board.**

**(ii) Pass all parts of a clinical examination developed and scored by a state or other entity that is substantially equivalent to the clinical examination of the north east regional board of dental examiners, incorporated, or a successor organization.**

R 338.11222 Licensure to practice dental hygiene; graduates of schools not in compliance with board standards; requirements.

Rule 1222. An individual who graduated from a school of dental hygiene that is not in compliance with the standards provided in R 338.11303 may be licensed by the board if the individual meets all of the following requirements:

(a) Complies with section 16174 of the act.

(b) Presents to the board a final, official transcript establishing graduation from a school in which he or she has obtained a dental hygiene degree. ~~If the transcript is issued in a language other than English, an original, official translation shall also be submitted.~~

(c) Successfully completes a program in a dental hygiene school that is in compliance with ~~the standards of~~ R 338.11303**.** ~~and the individual is~~ **The completion of the program shall be** confirmed by the administrator of the school attended.

(d) Passes all parts of the dental hygiene national board examination that is conducted and scored by the joint commission on national dental examinations.

(e)~~ Passes the combined regional examination in dental hygiene that is conducted and scored by the northeast regional board of dental examiners, incorporated.~~ **Passes a dental hygiene simulated clinical written examination conducted and scored by the north east regional board of dental examiners, incorporated, or a successor organization, and 1 of the following:**

**(i) Passes all parts of a clinical examination that is conducted and scored by the north east regional board of dental examiners, incorporated, or a successor organization or pass all parts of a clinical examination that is conducted by a regional testing agency approved by the board.**

**(ii) Passes all parts of a clinical examination developed and scored by a state or other entity that is substantially equivalent to the clinical examination of the north east regional board of dental examiners, incorporated, or a successor organization.**

R 338.11223 Registered dental hygienist examinations; passing scores.

Rule 1223. (1) The board approves and adopts the dental hygiene examination developed and scored by the joint commission on national dental examinations. A passing score on the examination shall be a converted score of not less than 75 on each part.

(2) The board approves and adopts the dental hygiene **simulated clinical written** examination developed and scored by the northeast regional board of dental examiners, incorporated**, or a successor organization**. ~~A passing score on the dental hygiene examination shall be~~ **An applicant shall present evidence of passing each component of the examination with** a converted score of not less than 75 on each part.

**(3) The board approves and adopts the clinical examination developed and scored by the north east regional board of dental examiners, incorporated. A passing score on the clinical examination shall be the score recommended by the north east regional board of dental examiners, incorporated, or its successor organization. An applicant shall present evidence of passing each component of the examination with a converted score of not less than 75.**

**(4) The board approves and adopts the clinical examinations of other regional testing agencies or state boards, if they are considered to be substantially equivalent. A passing score on the clinical examination shall be the score recommended by the sponsoring organization. An applicant shall present evidence of passing each component of the examination with a converted score of not less than 75.**

**(5) To determine substantial equivalency, as specified in subrule (4) of this rule, the board shall consider factors such as the following:**

**(a) Subject areas included.**

**(b) Detail of material.**

**(c) Comprehensiveness.**

**(d) Length of an examination.**

**(e) Degree of difficulty.**

**(6) To demonstrate substantial equivalency as specified in subrule (4) of this rule, an applicant may be required to submit, or cause to be submitted, materials such as the following:**

**(a) A copy of the examination booklet or description of the examination content and examination scores issued by the testing agency.**

**(b) An affidavit from the appropriate state licensing agency that describes the examination and sets forth the legal standards which were in effect at the time of the examination.**

**(c) An affidavit from a state licensing board or examination agency that describes the examination.**

R 338.11247 Limited licenses; issuance; requirements.

Rule 1247. (1) The board may issue a limited license, ~~pursuant to~~ **under** section 16182(2)(a) of the act, to an individual who is a graduate of a dental, dental hygiene, or dental assisting program approved by the board and who is enrolled or involved in a postgraduate course of study.

(2) The board may issue a limited license, ~~pursuant to~~ **under** section 16182(2)(b) of the act, to an individual who is a graduate dentist, dental hygienist, or dental assistant who is employed by a dental program or a dental auxiliary program as a ~~teacher~~ **faculty member**, and who functions only in a nonclinical academic research setting or in an administrative setting.

(3) The board may issue a limited license, ~~pursuant to~~ **under** section 16182(2)(c) of the act, to an individual who is a graduate dentist, dental hygienist, or dental assistant and who is employed by a dental program or a dental auxiliary program as a ~~clinical teacher.~~ **faculty member.** ~~The individual~~ **A limited licensed dentist** may perform dental procedures upon patients while employed as a ~~clinical teacher~~ **faculty member** by the dental or dental auxiliary program**. A limited licensed dental hygienist or a limited licensed dental assistant may perform dental procedures upon patients while employed as a faculty member of a dental or dental auxiliary program,** if such procedures are performed under the general supervision of a faculty member who is fully licensed as a dentist. An individual licensed under this subrule shall not do either of the following:

(a) Hold himself or herself out to the public as being engaged in the practice of dentistry other than as a ~~clinical instructor~~ **faculty member**.

(b) Provide dental services outside his or her employment as a ~~clinical instructor~~ **faculty member**.

(4) An individual applying for a limited license under section 16182(2) of the act shall meet both of the following requirements:

(a) Comply with section 16174 of the act.

(b) Submit proof of graduation from an approved school of dentistry, dental hygiene, or dental assisting or a certified copy of the diploma and transcript from an unapproved school of dentistry, dental hygiene, or dental assisting. ~~The latter proof shall be translated into English, if necessary, and certified by an official of the United States embassy.~~

**(c) Submit proof of appointment to a faculty position.**

(5) Limited licenses shall be renewed annually at the discretion of the board.

R 338.11255 Licensure by endorsement of dentist; requirements.

Rule 1255. (1) A dentist applying for licensure by endorsement shall be currently licensed in another state **or territory of the United States** and shall comply with section 16186 of the act and all of the following requirements:

(a) Have graduated from a school which meets the standards provided in R 338.11301 and submit original, official transcripts of professional education and documentation of graduation for board evaluation.

(b) Have passed all phases of the national board examination for dentists, in sequence. This requirement is waived for persons who graduated from an accredited school before 1950.

(c) Be endorsed, on a form supplied by the board, by the licensing agency of any state **or territory of the United States** in which the applicant holds a current license **or ever held a license as a dentist**.

(d) Show proof, on a form supplied by the board, of having no record of final or pending disciplinary action in any state **or territory of the United States** in which the applicant is or has been licensed.

~~(e) Show proof of meeting the requirements of R 338.11205, R 338.11207, or R 338.11211 if a failing grade has been received on any state or regional examination within 5 years from date of application for endorsement.~~

~~(f)~~ **(e)** Show proof of successful completion of ~~a substantially equivalent written and clinical examination.~~ **1 of the regional examinations as described in R 338.11203 (2), (3), and (4). This requirement is waived for individuals who were licensed initially in another state or territory of the United States before 2002 and who were not required to complete any regional examination as part of the initial licensing process as confirmed by the state or territory of the United States in which the initial license was awarded.**

~~(2) To determine substantial equivalency as specified in subrule (1)(f) of this rule, the board will consider factors such as the following:~~

~~(a) Subject areas included.~~

~~(b) Detail of material.~~

~~(c) Comprehensiveness.~~

~~(d) Length of the examination.~~

~~(e) Degree of difficulty.~~

~~(3) To demonstrate substantial equivalency as specified in subrule (1)(f) of this rule, the applicant may be required to submit, or cause to be submitted, such materials as the following:~~

~~(a) A certified copy of the examination.~~

~~(b) An affidavit from the responsible official of the appropriate state agency describing the examination and setting forth the legal standards which were in effect at the time of the examination.~~

~~(c) An affidavit describing the examination from the responsible official within a state society or another organization with knowledge of the examination.~~

~~(d) Other credible evidence.~~

~~(4) A dentist who does not fulfill the requirement of subrule(1) of this rule or who has previously failed the Michigan clinical examination or any portion of the northeast regional board examination shall not be eligible for licensure by endorsement in this state and shall be required to take the Michigan licensure examination as described in R 338.11203.~~

~~(5)~~ **(2)** The board may deny an application for licensure by endorsement upon finding the existence of a board action in any other state **or territory of the United States** for a violation related to applicable ~~subdivisions~~ **provisions** of section 16221 of the act or upon determining that the applicant does not fulfill the requirements of section 16186 of the act.

R 338.11259 Licensure by endorsement of dental hygienists; requirements.

Rule 1259. (1) A dental hygienist applying for licensure by endorsement shall be currently licensed in another state **or territory of the United States** and shall comply with section 16186 of the act and all of the following requirements:

(a) Have graduated from a school which meets the standards provided in R 338.11303 and submit original, official transcripts of professional education and documentation of graduation for board evaluation.

(b) Have passed all phases of the national board examination for dental hygienists. This requirement is waived for persons who graduated from an accredited school before 1962.

(c) Be endorsed, on a form supplied by the board, by the licensing agency of any state **or territory of the United States** in which the applicant holds a current license **or ever held a dental hygienist license**.

(d) Show proof, on a form supplied by the board, of having no record of final or pending disciplinary action in any state **or territory of the United States** in which the applicant is or has been licensed.

~~(e) Show proof of meeting the requirements of R 338.11205, R 338.11225, or R 338.11227 if a failing grade has been received on any state or regional examination within 5 years from date of application for endorsement.~~

~~(f)~~ **(e)** Show proof of successful completion of a substantially equivalent written and clinical examination. **This requirement is waived for individuals who were licensed initially in another state or territory of the United States before 2002 and who were not required to complete any regional examination as part of the initial licensing process as confirmed by the state or territory of the United States in which the initial license was awarded.**

~~(2) To determine substantial equivalency as specified in subrule(1)(f) of this rule, the board will consider factors such as the following:~~

~~(a) Subject areas included.~~

~~(b) Detail of material.~~

~~(c) Comprehensiveness.~~

~~(d) Length of the examination.~~

~~(e) Degree of difficulty.~~

~~(3) To demonstrate substantial equivalency as specified in subrule(1)(f) of this rule, the applicant may be required to submit, or cause to be submitted, such materials as the following:~~

~~(a) A certified copy of the examination.~~

~~(b) An affidavit from the responsible official of the appropriate state agency describing the examination and setting forth the legal standards which were in effect at the time of the examination.~~

~~(c) An affidavit describing the examination from the responsible official within a state society or another organization with knowledge of the examination.~~

~~(d) Other credible evidence.~~

~~(4) A dental hygienist who does not fulfill the requirements of subrule(1) of this rule or who has previously failed the Michigan clinical examination or any portion of the northeast regional board examination shall not be eligible for licensure by endorsement in this state and shall be required to take the Michigan licensure examination as described in R 338.11223.~~

~~(5)~~ **(2)** The board may deny an application for licensure by endorsement upon finding the existence of a board action in any other state **or territory of the United States** for a violation related to applicable ~~subdivisions~~ **provisions** of section 16221 of the act or upon determining that the applicant does not fulfill the requirements of section 16186 of the act.

R 338.11261 Licensure by endorsement of registered dental assistants; requirements.

Rule 1261. (1) A dental assistant applying for licensure by endorsement as a registered dental assistant shall be currently licensed **or registered** in another state **or territory of the United States** for performance of expanded functions as described in R 338.11405 and shall comply with section 16186 of the act and all of the following requirements:

(a) Have graduated from a school which meets the standards provided in R 338.11307 and submit original, official transcripts of professional education and documentation of graduation for board evaluation.

(b) Be endorsed, on a form supplied by the board, by the licensing agency of any state **or territory of the United States** in which the applicant holds a current license for performance of expanded functions.

(c) Show proof, on a form supplied by the board, of having no record of final or pending disciplinary action in any state **or territory of the United States** in which the applicant is or has been licensed.

~~(d) Show proof of meeting the requirements of R 338.11205, R 338.11241, or R 338.11245 if a failing grade has been received on any state or regional examination within 5 years from date of application for endorsement.~~

~~(e)~~ **(d)** Show proof of successful completion of a substantially equivalent written and clinical examination.

(2) To determine substantial equivalency as specified in subrule~~(1)(e)~~**(1)(d)** of this rule, the board will consider factors such as the following:

(a) Subject areas included.

(b) Detail of material.

(c) Comprehensiveness.

(d) Length of the examination.

(e) Degree of difficulty.

(3) To demonstrate substantial equivalency as specified in subrule~~(1)(e)~~**(1)(d)** of this rule, the applicant may be required to submit or cause to be submitted such materials as the following:

(a) A certified copy of the examination.

(b) An affidavit from the responsible official of the appropriate state agency describing the examination and setting forth the legal standards which were in effect at the time of the examination.

(c) An affidavit **from the responsible official within a state society or another organization** describing the examination**.** ~~from the responsible official within a state society or another organization with knowledge of the examination.~~

(d) Other credible evidence.

(4) A dental assistant who does not fulfill the requirements of subrule ~~(1)~~ **(1)** ~~of this rule or who has previously failed the Michigan clinical registered dental assisting examination~~ shall not be eligible for licensure by endorsement in this state and shall be required to comply with the provisions of R 338.11235.

(5) The board may deny an application for licensure by endorsement upon finding the existence of a board action in any other state **or territory of the United States** for a violation related to ~~application~~ subdivisions **applicable provisions** of section 16221 of the act or upon determining that the applicant does not fulfill the requirements of section 16186 of the act.

## PART 3. EDUCATION

R 338.11301 Approval of dental schools; standards; adoption by reference.

Rule 1301. (1) The board adopts **by reference in these rules** the standards ~~set forth by~~ **of** the commission on dental accreditation of **the American dental association, as set forth in the publication entitled "Accreditation Standards for Dental Education Programs," copyright 1998 and revised 2005,** ~~September 1995~~ as the standards by which the board shall determine whether to approve a school that ~~is in compliance~~ **complies** with ~~the~~ **these** standards. Certification by the commission on dental accreditation that a school ~~is in compliance~~ **complies** with ~~the~~ **these** standards ~~adopted by the board~~ constitutes a prima facie showing that the school ~~is in compliance~~ **complies** with ~~the~~ **these** standards. The board shall actively participate in the evaluation process.

(2) ~~The~~ **These** standards ~~of the commission on dental accreditation~~ may be obtained **at no cost from the Commission on Dental Accreditation of the American Dental Association, 211 East Chicago Avenue, Chicago, IL 60611-2678 or at no cost from the association's website at http://www.ada.org. Copies of these standards are available for inspection and distribution at cost** from the Michigan Board of Dentistry, Department of ~~Consumer and Industry Services~~ **Community Health**, **611 West Ottawa,** P. O. Box ~~30018~~ **30670**, Lansing, MI 48909**.**~~, at no cost, or from the Commission on Dental Accreditation, 211 E. Chicago Ave., Chicago, IL 60611, at no cost.~~

R 338.11303 Approval of dental hygiene schools; standards; adoption by reference.

Rule 1303. (1) The board adopts **by reference in these rules** the standards ~~set forth by~~ **of** the commission on dental accreditation of **the American dental association, as set forth in the publication entitled "Accreditation Standards for Dental Hygiene Education Programs," copyright 1998 and revised 2005,** ~~July~~ ~~1995~~ as the standards by which the board shall determine whether to approve a school that prepares persons for licensure as dental hygienists. Certification by the commission on dental accreditation that a school ~~is in compliance~~ **complies** with ~~the~~ **these** standards ~~adopted by the board~~ constitutes a prima facie

showing that the school ~~is in compliance~~ **complies** with ~~the~~ **these** standards. The board shall actively participate in the evaluation process.

(2) ~~The~~ **These** standards ~~of the commission on dental accreditation~~ may be obtained **at no cost from the Commission on Dental Accreditation of the American Dental Association, 211 East Chicago Avenue, Chicago, IL 60611-2678 or at no cost from the association's website at http://www.ada.org. Copies of these standards are available for inspection and distribution at cost** from the Michigan Board of Dentistry, Department of ~~Consumer and Industry Services~~ **Community Health**, **611 West Ottawa,** P.O. Box ~~30018~~ **30670**, Lansing, MI 48909**.**~~, at no cost, or from the Commission on Dental Accreditation, 211 E. Chicago Ave., IL 60611, at no cost.~~

R 338.11307 Approval of dental assisting schools; standards; adoption by reference**.** ~~; approval of schools preparing persons for licensure as registered dental assistants.~~

Rule 1307. (1) The board adopts **by reference** the standards of the commission on dental accreditation of **the American dental association, as set forth in the publication entitled "Accreditation Standards for Dental Assisting Education Programs," copyright 1998 and revised 2005,** ~~January 1995~~ as the standards by which the board shall determine whether to approve a school that ~~is in compliance~~ **complies** with ~~the~~ **these** standards. Certification by the commission on dental accreditation that **a school complies with these** ~~the~~ standards ~~adopted by the board~~ constitutes a prima facie showing that the school ~~is~~ ~~in compliance~~ **complies** with the standards. The board shall actively participate in the evaluation process.

(2) ~~The~~ **These** standards ~~of the commission on dental accreditation~~ may be obtained **at no cost from the Commission on Dental Accreditation of the American Dental Association, 211 East Chicago Avenue, Chicago, IL 60611-2678 or at no cost from the association's website at http://www.ada.org. Copies of these standards are available for inspection and distribution at cost** from the Michigan Board of Dentistry, Department of ~~Consumer and Industry Services~~ **Community Health**, **611 West Ottawa,** P.O. Box ~~30018~~ **30670**, Lansing, MI 48909**.**~~, at no cost, or from the Commission on Dental Accreditation, 211 E. Chicago Ave., Chicago, IL 60611, at no cost.~~

## PART 4. DELEGATION, SUPERVISION, ASSIGNMENT

R 338.11403 Assistant; delegation of intra-oral procedures under general supervision**.** ~~; delegation of intra-oral procedures under direct supervision.~~

Rule 1403. (1) The following intra-oral procedures shall not be delegated to an assistant unless the procedures are performed under general supervision:

(a) Trial sizing of orthodontic bands.

(b) Holding the matrix for anterior resin restorations.

(c) Making impressions for study and opposing models.

(d) ~~Application~~ **Applying** of topical anesthetic solutions (nonaerosol).

(e) Instructing in the use and care of dental appliances.

(f) ~~Operation of~~ **Operating** dental radiographic equipment if the assistant has successfully completed a course in dental radiography which is substantially equivalent to a course taught in a program approved by the board pursuant to R 338.11303 or R 338.11307. This subdivision takes effect ~~3 years after the effective date of this amendatory rule.~~ **July 26, 1992.**

~~(2) The following intra-oral procedures shall not be delegated to an assistant unless the procedures are performed only under direct supervision:~~

~~(a) Placement and removal of orthodontic separators.~~

~~(b) Placement and removal of orthodontic elastics, ligatures, and arch wires.~~

~~(3) Except for those procedures described in this rule, intra-oral procedures shall not be delegated to an assistant.~~

**R 338.11404 Assistant; delegation of intra-oral procedures under direct supervision.**

**Rule 11404. (1) The following intra-oral procedures shall not be delegated to an assistant unless the procedures are performed under direct supervision:**

**Placement and removal of orthodontic separators.**

**(b) Placement and removal of orthodontic elastics, ligatures, and arch wires.**

**(2) Except for those procedures described in R 338.11403 and this rule, intra-oral procedures shall not be delegated to an assistant.**

R 338.11405 Registered dental assistant; ~~assignment~~ **performance** of intra-oral procedures under general supervision**.** ~~; assignment of intra-oral procedures under direct supervision.~~

Rule 1405. (1) A dentist shall not assign the intra-oral dental procedures detailed in R 338.11403~~(1)~~**(1)** and the following additional intra-oral procedures to a registered dental assistant unless the procedures are performed under the general supervision of a dentist:

(a) ~~Placement and removal of~~ **Placing and removing a** rubber dam.

(b) ~~Placement and removal of~~ **Placing and removing a** nonmetallic temporary ~~restorations~~ **restoration with nonrotary instruments**.

(c) Removing excess cement from supragingival surfaces of a tooth with nonrotary instruments.

(d) ~~Application of~~ **Applying** anticariogenics after oral prophylaxis, when ordered by a licensed dentist.

(e) ~~Mouth mirror inspection of~~ **Inspecting an** oral cavity **with a mouth mirror**, including chartings of lesions, existing restorations, missing teeth, and classification of occlusion.

(f) Sizing of temporary crowns and bands.

**(2) A dentist shall not assign the following additional intra-oral procedures to a registered dental assistant unless the registered dental assistant has successfully completed an approved course, as defined in section 16611(12) and (13) of the act. These procedures shall be performed under the general supervision of a dentist:**

**Performing pulp vitality testing.**

**Placing and removing matrices and wedges.**

**Applying cavity liners and bases.**

**Placing and removing nonepinephrine retraction cords.**

**Applying desensitizing agents.**

**(f) Making an impression for orthodontic appliances, mouth guards, bite splints, and bleaching trays.**

**Drying endodontic canals with absorbent points.**

**(h) Etching and placing adhesives before placement of orthodontic brackets.**

~~(2) A dentist shall not assign the intra-oral dental procedures detailed in R 338.11403(2) and the following additional intra-oral procedures to a registered dental assistant unless the procedures are performed under the direct supervision of a dentist:~~

~~(a) Placement and removal of periodontal dressings.~~

~~(b) Temporary cementation and removal of temporary crowns and bands.~~

~~(c) Removal of sutures.~~

~~(d) Polishing specific teeth with a slow-speed rotary handpiece immediately before procedures that require acid etching, for:~~

~~(i) Placement of sealants.~~

~~(ii) Placement of resin-bonded orthodontic appliances.~~

~~(iii) Placement of direct restorations by the dentist.~~

~~(3) Except for the procedures described in this rule, a dentist shall not assign intra-oral procedures to a registered dental assistant.~~

**R 338.11405a Registered dental assistant; assignment of intra-oral procedures under direct supervision.**

**Rule 11405a. (1) A dentist shall not assign to a registered dental assistant the intra-oral dental procedures specified in R 338.11404(1) and the following intra-oral procedures unless the procedures are performed under the direct supervision of a dentist:**

**(a) Placing and removing periodontal dressings.**

**(b) Temporarily cementing and removing temporary crowns and bands.**

**(c) Removing sutures.**

**(d) Polishing specific teeth with a slow-speed rotary hand piece immediately before procedures that require acid etching, for any of the following:**

**(i) Placing sealants.**

**(ii) Placing resin-bonded orthodontic appliances.**

**(iii) Placing direct restorations by the dentist.**

**(2) Except for the procedures described in this rule, a dentist shall not assign intra-oral procedures to a registered dental assistant.**

**(3) A dentist shall not assign the following intra-oral procedures to a registered dental assistant unless the registered dental assistant has successfully completed an approved course, as defined in section 16611(11) of the act, followed by a comprehensive clinical experience of sufficient duration that validates clinical competence through a criterion-based assessment instrument. These procedures shall be performed under the direct supervision of a dentist:**

**(a) Placing, condensing, and carving amalgam restorations.**

**(b) Making final impressions for indirect restorations.**

**(4) A dentist shall not assign the assisting and monitoring of the administration of nitrous oxide analgesia by the dentist or registered dental hygienist to a registered dental assistant unless the registered dental assistant has successfully completed an approved course, as defined in section 16611(7) of the act, in the assisting and monitoring of the administration of nitrous oxide analgesia. This procedure shall be performed under the direct supervision of a dentist.**

**(5) Except for the procedures described in R 338.11405 and this rule, a dentist shall not assign intra-oral procedures to a registered dental assistant.**

R 338.11406 Assignment of intra-oral procedures to registered dental hygienist.

Rule 1406. The intra-oral procedures listed in R 338.11405~~(1)(a),~~ **(1)** (b)~~,~~ and (f) and ~~(2)(b)~~ shall not be assigned to a registered dental hygienist unless the registered dental hygienist is also licensed as a registered dental assistant ~~pursuant to~~ **under** R 338.11235.

R 338.11408 Registered dental hygienist; ~~assignment~~ **performance** of intra-oral procedures under assignment of dentist. ~~; assignment performance of intra-oral procedures under direct supervision.~~

Rule 1408. (1) A registered dental hygienist shall not perform the following intra-oral dental procedures unless the procedures are performed under the assignment of a dentist as defined in section 16601 of the code:

(a) ~~Removal of~~ **Removing** accretions and stains from the surfaces of the teeth and ~~application of~~ **applying** topical agents essential to complete prophylaxis.

(b) Root planing **or debridement**.

(c) Polishing and contouring restorations.

(d) ~~Application of~~ **Applying** anticariogenic agents.

(e) Charting of the oral cavity**,** ~~using radiographs,~~ including all of the following:

(i) Periodontal charting.

(ii) Intra- and extra-oral ~~examination~~ **examining** of soft tissue.

(iii) Charting of radiolucencies or radiopacities, existing restorations, and missing teeth.

(f) Preliminary ~~examination, including~~ **examining that includes** both of the following:

(i) Classifying occlusion.

(ii) Testing pulp vitality using an electric pulp tester.

(g) ~~Application of~~ **Applying** nonaerosol and noncaustic topical anesthetic agents by prescription of the dentist.

(h) ~~Placement and removal of~~ **Placing and removing** intra-coronal temporary sedative dressings.

(i) Taking intra-oral measurements for orthodontic procedures.

(j) ~~Placement and removal of~~ **Placing and removing** postextraction and periodontal dressings.

(k) ~~Removal of~~ **Removing** excess cement from tooth surfaces.

~~(l)~~ **(l)** ~~Nutritional~~ **Providing nutritional** counseling for oral health and maintenance.

(m) ~~Application of~~ **Applying** commonly accepted emergency procedures.

(n) ~~Removal of~~ **Removing** sutures.

(o) ~~Placement and removal of~~ **Placing and removing a** rubber dam.

**(p) Making impressions for study or opposing models, orthodontic appliances, mouth guards, bite splints, and bleaching trays.**

**(q) Operating dental radiographic equipment.**

**(r) Placing subgingival medicaments.**

**(s) Temporary cementing and removing of temporary crowns and bands.**

(2) A registered dental hygienist shall not perform soft tissue curettage unless under the direct supervision of a dentist.

**R 338.11409 Registered dental hygienist; assignment of intra-oral procedures under direct supervision.**

**Rule 11409. (1) A registered dental hygienist shall not perform the following intra-oral dental procedures unless the procedures are performed under the direct supervision of a dentist as defined in section 16601 of the code:**

**Performing soft tissue curettage.**

**(b) Administering intra-oral block or infiltration anesthesia or nitrous** oxide analgesia or both to a patient 18 years of age or older and only if the registered dental hygienist has met the following requirements:

(i) Successfully completed an approved course, as defined in section 16611(4) of the act, in the administration of local anesthesia and/or nitrous oxide analgesia.

**(ii) Successfully completed a state or regional board administered written examination in local anesthesia within 18 months of completion of the approved course.**

**(iii) Successfully completed a state or regional board administered written examination on nitrous oxide analgesia, within 18 months of completion of the approved course, if such an examination exists.**

(iv) Maintains and provides evidence of current certification in basic or advanced cardiac life support.

(2) A dental hygienist who meets the requirements of this rule may not administer more than 50% nitrous oxide.

**PART 6. GENERAL ANESTHESIA AND INTRAVENOUS CONSCIOUS SEDATION** AND ENTERAL SEDATION

R 338.11603 Adoption of standards; effect of certification of programs.

Rule 3. (1) The board adopts the standards for advanced training in anesthesia and pain control set forth by the ~~council~~ **commission** on dental education of the American dental association in part 2 of the publication entitled "Guidelines for Teaching the Comprehensive Control of ~~Pain and~~ Anxiety **and Pain** in Dentistry," ~~1993~~ **October 2003** edition. Part 2 of the guidelines may be obtained **at no cost** from the ~~Michigan Board of Dentistry, Department of Consumer and Industry Services, P.O. Box 30018, Lansing, MI 48909, or from the Council~~ **Commission** on Dental Education, American Dental Association, 211 E. Chicago Avenue, Chicago, IL 60611**, or on the association's website at http://www.ada.org/prof/resources.** ~~, at no cost.~~ **A copy of the standards is available for inspection and distribution at cost from the Michigan Board of Dentistry, Department of Community Health, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909.** Certification of programs by the council on dental education as meeting the standards adopted constitutes a prima facie showing that the program is in compliance with the standards.

(2) The board adopts the standards for training in intravenous conscious sedation and related subjects set forth by the council on dental education of the American dental association in part 1 of the publication entitled "Guidelines for Teaching the Comprehensive Control of ~~Pain and~~ Anxiety **and Pain** in Dentistry," ~~1993~~ **October 2003** edition. Part 1 of the guidelines may be obtained **at no cost** from the ~~Michigan Board of Dentistry, Department of Consumer and Industry Services, P.O. Box 30018, Lansing, MI 48909, or from the Council~~ **Commission** on Dental Education, American Dental Association, 211 E. Chicago Avenue, Chicago, IL 60611**, or on the association's website at http://www.ada.org/prof/resources.** ~~, at no cost.~~ **A copy of the standards is available for inspection and distribution at cost from the Michigan Board of Dentistry, Department of Community Health, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909.** ~~, at no cost.~~ Certification of programs by the council on dental education as meeting the standards adopted constitutes a prima facie showing that the program is in compliance with the standards.

(3) The board adopts the standards for ~~certification~~ **credentialing** in basic and advanced ~~cardiac~~ life support set forth by the American heart association in the ~~publication~~ **guidelines for cardiopulmonary resuscitation and emergency cardiac care for professional providers and published in** ~~entitled "Standards and Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care" and published in the publication entitled "Journal of the American Medical Association," volume 268, no.16, on October 28, 1992.~~ **"Guidelines 2000 for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care (70-2041).** A copy of the guidelines **for cardiopulmonary resuscitation and emergency cardiac care may be obtained from the**

**American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231 or at http://www.americanheart.org, at a cost of $20.00 as of the adoption of these rules. A copy of this document** ~~may be obtained~~ **is available for inspection and distribution at cost** from the Michigan Board of Dentistry, Department of ~~Consumer and Industry Services~~ **Community Health**, **611 West Ottawa,** P.O. Box ~~30018~~ **30670**, Lansing, MI 48909**.** ~~, at no cost, or from the American Heart Association, 7320 Greenville Avenue, Dallas, TX 75231, at a cost as of the time of adoption of these rules of $1.04.~~

(4) The board adopts the standards regarding the equipment within a facility set forth by the American association of oral and maxillofacial surgeons in the publication entitled "Office Anesthesia Evaluation Manual," ~~fifth~~ **sixth** edition**.** ~~, 1995. A copy of the "Office Anesthesia Evaluation Manual" may be obtained from the Michigan Board of Dentistry, Department of Consumer and Industry Services, P.O. Box 30018, Lansing, MI 48909, at no cost, or from the American Association of Oral and Maxillofacial Surgeons, AAOMS publications #A-2, P.O. Box 5188, Glendale Heights, IL 60139, at a cost as of the time of adoption of these rules of $50.00.~~ **A copy of this manual may be obtained from the American Association of Oral and Maxillofacial Surgeons, 9700 West Bryn Mawr Avenue, Rosemont, IL 60018, or at the association's website at http://www.aaoms.org at a cost of $95 for members and professional/allied staff, $285 for nonmembers, and $190 for institutions as of the adoption of these rules. A copy of this document is available for inspection and distribution at cost from the Michigan Board of Dentistry, Department of Community Health, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909.**

**R 338.11605 Enteral sedation; requirements for approval of course and instructor.**

**Rule 11605. (1) A course in enteral sedation shall be approved by the board of dentistry and shall, at a minimum, be consistent with the enteral sedation course as outlined in the American dental association's educational guidelines "Part Three: Teaching the Comprehensive Control of Pain and Anxiety in a Continuing Education Program," October 2003, whose guidelines are adopted by the board. Part 3 of the guidelines may be obtained at no cost from the American Dental Association, 211 E. Chicago Avenue, Chicago, IL 60611, or on the association's website at http://www.ada.org. A copy of the guidelines is available for inspection and distribution at cost from the Michigan Board of Dentistry, Department of Community Health, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909.**

**(2) An instructor of a course in enteral sedation shall be approved by the board of dentistry and shall have at least 3 years experience which includes his or her formal postdoctoral training in anxiety and pain control.**

**(3) An instructor of an approved enteral sedation course shall certify the competency of a participant upon a participant's satisfactorily completing training in each conscious sedation technique, including instruction, clinical experience, and airway management.**

## PART 7. CONTINUING EDUCATION

**R 338.11704a Acceptable continuing education for dental hygienists and dental assistants; limitations.**

**Rule 4a. The board shall consider any of the following as acceptable continuing education:**

**(a) Successful completion of a course or courses offered for credit in a dental school or hospital-based dental specialty program approved by the board** ~~**pursuant to the provisions of**~~ under **R 338.11301, a dental hygiene school approved by the board** ~~**pursuant to the provisions of**~~ under **R**

**338.11303, or a dental assisting school approved by the board ~~pursuant to the provisions of~~** under **R 338.11307. Ten hours of continuing education shall be credited for each quarter credit earned and 15 hours shall be credited for each semester credit earned, without limitation.**

(b) Attendance at a continuing education program offered by a dental school or hospital-based dental specialty program approved by the board ~~pursuant to the provisions of~~ **under** R 338.11301, a dental hygiene school approved by the board ~~pursuant to the provisions of~~ **under** R 338.11303, or a dental assisting school approved by the board ~~pursuant to the provisions of~~ **under** R 338.11307. One hour of continuing education shall be credited for each hour of program attendance, without limitation.

(c) Attendance at a continuing education program approved by the board ~~pursuant to the provisions of~~ **under** R 338.11705 of this part. One hour of continuing education shall be credited for each hour of program attendance, without limitation.

(d) Development and presentation of a table clinic demonstration or a continuing education lecture offered in conjunction with the presentation of continuing education programs approved by the board. One hour of continuing education shall be credited for each hour devoted to the development and initial presentation of a table clinic demonstration or a continuing education lecture, with a maximum of 10 hours of continuing education credited for the development and presentation of the same table clinic demonstration or continuing education lecture.

(e) Twelve hours of continuing education shall be credited for the initial publication of an article or articles related to the practice of dentistry, dental hygiene, or dental assisting in the journal of an accredited school of dentistry, dental hygiene or dental assistant, or in a state or state component association of dentists, dental specialists, dental hygienists, or dental assistants.

(f) Twenty-five hours of continuing education shall be credited for the initial publication of an article or articles related to the practice of dentistry, dental hygiene, or dental assisting in a textbook or in the journal of a national association of dentists, dental specialists, dental hygienists, or dental assistants.

(g) Twelve hours of continuing education may be earned in board-approved, ~~on-line~~ **online** continuing education activities.

(h) One hour of continuing education shall be credited for each hour of reading articles and viewing or listening to media, other than ~~on-line~~ **online** programs, devoted to dental, dental hygiene, or dental assisting education with a maximum of 10 hours credited under this category.

(i) Renewal of a license held in another state that requires continuing education for license renewal that is substantially equivalent to that required in these rules if the applicant resides and practices in another state. For a registered dental hygienist or registered dental assistant, 36 hours of continuing education shall be credited for evidence of current licensure in such other state.

(j) For a registered dental assistant, meeting the requirements for recertification in R 338.11705~~(2)~~ **(3)**. Thirty-six hours of continuing education shall be credited for evidence of current certification, other than life certification, by the dental assisting national board.

(k) One continuing education contact hour may be granted for each hour of program attendance at a continuing education program which has been granted approval by another state board of dentistry.

(l) Six hours of continuing education shall be credited to dental hygienists or registered dental assistants for attendance at dental related programs which are documented by the licensee as relevant to health care and advancement of the licensee's dental education. The board shall deny a request for approval if the continuing education request does not meet the criteria used by the board for approval of continuing education sponsors.

(m) A maximum of 18 credit hours per renewal period may be earned for programs related to specific dental specialty topics approved for category 1 continuing education by the boards of medicine or osteopathic medicine.

R 338.11705 Standards and requirements; adoption by reference.

Rule 5. (1) The board approves and adopts by reference the standards and criteria of the national sponsor approval program of the academy of general dentistry for approval of continuing education sponsoring organizations, institutions, and individuals, which are set forth in the publication entitled "Program Approval for Continuing Education (PACE), a Guidebook, Revised July 2002". Information on the pace standards and criteria is available at no cost from the Academy of General Dentistry, 211 East Chicago Avenue, Suite 900, Chicago, IL 60611 or from the academy's internet website at http://www.agd.org. A copy of the guidebook is available for inspection and distribution at no cost from the Michigan Department of Community Health, Bureau of Health Professions, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909. Approval of a sponsor by the academy of general dentistry committee on national sponsor approvals or by any academy of general dentistry constituent academy shall constitute prima facie evidence that the sponsor meets the standards and criteria adopted by the board.

(2) The board approves and adopts by reference the standards and criteria of the National Sponsor Approval Program of the American Dental Association Continuing Education Recognition Program (ADA CERP) for approval of continuing education sponsoring organizations, which are set forth in the publication entitled "ADA CERP Recognition Standards and Procedures, Revised April 2002." A copy of this publication may be obtained at no cost from the association at ADA CERP 211 E. Chicago Avenue, Chicago, IL 60611-2678 or from the association's internet website at http://www.ada.org/prof/ed/ce/cerp. A copy of the publication is available for inspection and distribution at cost from the Department of Community Health, Bureau of Health Professions, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909. Approval of a sponsor by the ADA CERP or by any constituent group of ADA CERP shall constitute prima facie evidence that the sponsor meets the standards and criteria adopted by the board.

(3) The board approves and adopts by reference the requirements for recertification established by the dental assisting national board and set forth in the publication entitled "2002 Recertification Guidelines & Requirements." A copy of the publication may be obtained at no cost from the Dental Assisting National Board, 676 N. St. Clair Street, Suite 1880, Chicago, IL 60611 or from the national board's internet website at http://www.danb.org. A copy of the guidelines and requirements are available for inspection and distribution at cost from the Department of Community Health, Bureau of Health Professions, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909.

(4) The board shall consider any continuing education program that is offered by a sponsor that applies to the board and demonstrates it substantially meets the standards and criteria adopted by the board as a continuing education program approved by the board.

(5) The board adopts by reference the standards for certification in basic and advanced cardiac life support set forth by the American heart association in the standards and guidelines for cardiopulmonary resuscitation and emergency cardiac care **for professional providers** and published in "Guidelines 2000 for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care (70-2041). A copy of the guidelines for cardiopulmonary resuscitation and emergency cardiac care may be obtained from the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231 or at http://www.ahajournals.org at a cost of $20.00 as of the adoption of these rules. A copy of this document is available for inspection and distribution at cost from the Department of Community Health, Bureau of Health Professions, 611 West Ottawa, P.O. Box 30670, Lansing, MI 48909.

(6) The board may approve a state, regional, or national dental organization as an acceptable provider of continuing education courses if the organization presents standards, criteria, and course monitoring procedures for its courses that are acceptable to the board. This approval may be withdrawn if the board determines the organization is not complying with the standards and criteria presented. The standards,

criteria, and monitoring procedures will be retained in the department's board files. An organization shall update its file with the department every 5 years.

## NOTICE OF PUBLIC HEARING

SOARH 2005-028
NOTICE OF PUBLIC HEARING
Board of Dentistry – General Rules

The Department of Community Health will hold a public hearing on Friday, October 28, 2005, at 9:00 a.m. at the Department of Community Health, Ottawa Building, 611 West Ottawa, Conference Room 3, Upper Level, Lansing, Michigan.

The public hearing is being held to receive comments from interested persons on amendments to the Michigan Board of Dentistry Administrative Rules. Public Act 423 of 2002 amended the Public Health Code to permit dental hygienists to administer intra-oral block and infiltration anesthesia when certain educational and testing requirements are met. Public Act 30 of 2004 amended the Code to allow a dental hygienist to administer nitrous oxide and to allow a registered dental assistant to monitor and assist in the administration of the drug when supervised, if certain educational and experiential requirements are met. The rules are being amended to provide for the implementation of Public Acts 423 and 30. In addition, the rules are being revised to provide testing options for individuals who apply for licensure as a dentist or dental hygienist and to establish requirements for the approval by the Board of Dentistry of a course in enteral sedation and an instructor of this course.

These rules are being promulgated under the authority of sections 16145(3) and 16601 of 1978 PA 368, MCL 333.16145(3) and 333.16601 et seq. and Executive Reorganization Order Nos. 1996-1, 1996-2 and 2003-1, MCL 330.3101, 445.2001 and 445.2011. The rules will take effect immediately upon filing with the Secretary of State, unless specified otherwise in the rules.

Hearing comments may be presented in person, with written comments available at the time of presentation. Written comments also will be accepted after the public hearing at the following address or E-mail address until Friday, November 4, 2005, at 5:00 p.m. Address communications to:

Department of Community Health
Bureau of Health Professions – Dentistry Public Hearing
P.O. Box 30670
Lansing, MI 48909-8170
Attention: Diane R. Lewis, Policy Administration Manager
E-mail address: drlewis@michigan.gov

A copy of the proposed rules may be obtained by contacting the Bureau at the address noted above. Electronic copies also may be obtained at http://www.michigan.gov/orr.

All hearings are conducted in compliance with the 1990 Americans With Disabilities Act. Hearings are held in buildings that accommodate mobility-impaired individuals and accessible parking is available. A disabled individual who requires accommodations for effective participation in a hearing should call Nita Hixson at (517) 335-1341 to make the necessary arrangements. To ensure availability of the accommodation, please call at least 1 week in advance.

Date: September 28, 2005 SOAHR # 2005-028 CH

## PROPOSED ADMINISTRATIVE RULES

SOARH 2005-058

DEPARTMENT OF COMMUNITY HEALTH

BUREAU OF COMMUNITY LIVING, CHILDREN AND FAMILIES

BLOOD LEAD ANALYSIS REPORTING

Filed with the Secretary of State on

These rules take effect immediately after filing with the Secretary of State unless adopted under sections 33, 44, or 45a(6) of 1969 PA 306. Rules adopted under these sections become effective 7 days after filing with the Secretary of State.

(By authority conferred on the ~~community public health agency~~ department of community health by 1978 PA 368, MCL 333.5111, 333.5474(1)(c), and 333.20531, 1978 PA 312, MCL 325.78, and Executive Reorganization Order No. 1996-1, MCL 330.3101)

R 325.9084 and R 325.9086 of the Michigan Administrative Code are amended as follows:

R 325.9084 Electronic communications.

Rule 4. (1) A clinical laboratory ~~may~~ **shall** submit the data required in R 325.9083 electronically to the agency.

(2) For electronic reporting, upon mutual agreement between the reporting laboratory and the agency, the reporting shall utilize the data format specifications provided by the agency.

R 325.9086 Confidentiality of reports.

Rule 6. (1) **Except as provided in subrule (2) of this rule,** ~~T~~**t**he agency shall maintain the confidentiality of all reports of blood lead tests submitted to the agency and shall not release reports or information that may be used to directly link the information to a particular individual**.**~~,~~

(2) The agency may release reports or information, otherwise protected under subrule (1) of this rule under one of the following conditions:

**(a) If** the agency has received written consent from the individual, or from the individual's parent or legal guardian, requesting the release of information**.**

(b) If necessary for law enforcement investigation or prosecution of a property manager, housing commission, or owner of a rental unit under 2004 PA 434, MCL 333.5475a.

(c) If the director of the department of determines that release is crucial to protect the public health against imminent threat or danger.

**(3)** ~~(2)~~ Medical and epidemiological information that is released to a legislative body shall not contain information that identifies a specific individual. Aggregate epidemiological information concerning the public health that is released to the public for information.

September 6, 2005

## NOTICE OF PUBLIC HEARING

SOARH 2005-058

**NOTICE OF PUBLIC HEARING**

**Blood Lead Analysis Reporting**

The Department of Community Health will hold a public hearing on Friday, October 28, 2005, at 9:00 a.m. at the Department of Community Health, 3423 N. Martin Luther King Blvd, Baker-Olin West Building, Manty Conference Room B/C, Lansing, Michigan.

The public hearing is being held to receive comments from interested persons on amendments to the Blood Lead Analysis Reporting rules. The proposed change in R 325.9084 is amended pursuant to PA 54 of 2004, which changes "permissive" to "required" electronic reporting, and the proposed changes in R 325.9086 are being amended to allow prosecution of rental property owners renting housing with known lead hazards to families with young children. This proposed rule amendment would change the frequency with which housing with lead hazards are rented to families with young children.

These rules are being promulgated under the authority of 1978 PA 368, MCL 333.5111, 1978 PA 312, MCL 333.5474(1)(c), 204 PA 54, MCL333.20531 and Executive Reorganization Order No. 1996-1, being MCL 333.5111 and MCL 325.78, and 330.3101 of the Michigan Compiled Laws.

Hearing comments may be presented in person, with written comments available at the time of presentation. Written comments also will be accepted at the following address or E-mail address until Monday, October 31, 2005. Address communications to:

Department of Community Health
Office of Legal Affairs
201 Townsend
Lansing, MI 48913
Attention: Mary Greco, Legal Affairs Coordinator
E-mail address: grecom@michigan.gov

A copy of the proposed rules may be obtained by contacting the Bureau at the address noted above. Electronic copies also may be obtained at http://www.michigan.gov/orr.

All hearings are conducted in compliance with the 1990 Americans With Disabilities Act. Hearings are held in buildings that accommodate mobility-impaired individuals and accessible parking is available. A disabled individual who requires accommodations for effective participation in a hearing should call Nita Hixson at (517) 335-1341 to make the necessary arrangements. To ensure availability of the accommodation, please call at least 1 week in advance.

Date: September 20, 2005 SOAHR # 2005-058-CH

## PROPOSED ADMINISTRATIVE RULES

SOARH 2005-060

DEPARTMENT OF LABOR & ECONOMIC GROWTH

WORKERS' COMPENSATION AGENCY

WORKERS**'** COMPENSATION HEALTH CARE SERVICES

Filed with the Secretary of State on
These rules become effective 7 days after filing with the Secretary of State.

(By authority conferred on the workers**'** compensation agency by sections 205 and 315 of 1969 PA 317, section 33 of 1969 PA 306, Executive Reorganization Order Nos. 1982-2, 1986-3, 1990-1, 1996-2, and 2003-1, MCL 418.205, 418.315, 24.233, 18.24, 418.1, 418.2, 445.2001, and 445.2011)

R 418.10107, R 418.10212, R 418.10913, R 418.10922, R 418.101001, R 418.101002, R 418.101003, R 418.101023, and R 418.101504, are amended, R 418.10916 is rescinded, and R 418.101003b is added to the Michigan Administrative Code.

R 418.10107 Source documents; adoption by reference.

Rule 107. The following documents, are adopted by reference in these rules and are available for inspection at, or purchase from, the workers' compensation agency, health care services division, P.O. Box 30016, Lansing, Michigan 48909, at the cost~~s~~ listed or from the organizations listed:

(a) "Physicians' Current Procedural Terminology (CPT®)-200**5**~~4~~," standard edition, copyright ~~October~~ **November** 200**5**~~4~~, published by the American Medical Association, PO Box 930876, Atlanta GA, 31193-0876, order # ~~OP054105CFJ ISBN~~**EP054106CKF**~~: 1-57947-578-7~~, 1-800-621-8335. The publication may be purchased at a cost of $~~62.~~**91.**95, plus $~~9~~**11**.95 for shipping and handling as of the time of adoption of these rules. Permission to use this publication is on file in the workers' compensation agency.

(b) "Medicare's National Level II Codes, HCPCS, 200~~5~~**6**," copyright ~~November~~**December** 200**5**~~4~~, published by the American Medical Association, P.O. Box 930876 Atlanta GA 31193-0876, order # OP~~095105CFJ ISBN~~**095106CKF**~~: 1-57947-571-X~~, customer service 1-800-621-8335. The publication may be purchased at a cost of $89.95, plus $11.95 for shipping and handling as of the time of adoption of these rules.

(c) "Medicare RBRVS 200**5**~~4~~: The Physicians' Guide," published by the American Medical Association, 515 North State Street, Chicago IL, 60610, order #OPO59605CFJ, 1-800-621-8335. The publication may be purchased at a cost of $~~79~~**84**.95, plus $11.95 shipping and handling as of the time of adoption of these rules.

(d) "Medicare RBRVS 200~~5~~**6**: The Physicians' Guide," published by The American Medical Association, ~~515 North State Street, Chicago Il, 60610~~**P.O. Box 930876, Atlanta GA 31193-0876**, order #OP~~O59605CFJ~~**059606CKF**, 1-800-621-8335. The publication may be purchased at a cost of $84**7**.95, plus $11.95 shipping and handling as of the time of adoption of these rules.

September 28, 2005

(e) "International Classification of Diseases, ICD-9-CM 200~~5~~**6** Volumes 1 & 2"**,** copyright **September** 200~~4~~**5**, American Medical Association, P.O. Box 930876, Atlanta GA 31193-0876, order #OP~~068105CFJ~~**065306CKF**, 1-800-621-8335. The publication may be purchased at a cost of $~~64.~~**84.**95, plus $~~9~~**11**.95 shipping and handling as of the time of adoption of these rules.

(f) "200~~4~~**5** Drug Topics Red Book," published by Medical Economics Company Inc., Five Paragon Drive, Montvale, NJ 07645-1742, 1-800-678-5689. The publication may be purchased at a cost of $7~~5~~**6**.95, plus $9.95 for shipping and handling as of the time of adoption of these rules.

(g) "Michigan Uniform Billing Manual," developed in cooperation with the American Hospital Association's National Uniform Billing Committee, published by Michigan Health and Hospital Association, Attn: UB-92 Subscriptions, ~~6215 West St. Joseph Highway~~**110 W. Michigan, Ste 1200**, Lansing, MI 489~~17~~**33**, 517-~~886-8366~~**703-8622**. As of the time of adoption of these rules, the cost of the publication is $160.00, plus 6% sales tax.

R 418.10212 Physical and occupational therapy; physical medicine services.

Rule 212. (1) For the purposes of worker~~'~~s**'** compensation, physical medicine services, procedure codes 97010-97799, shall be referred to as "physical treatment~~.~~"**when the services are provided by a practitioner other than a physical therapist or an occupational therapist.** Physical therapy means physical treatment provided by a licensed physical therapist. Occupational therapy means physical treatment provided by an occupational therapist.

(2) Physical medicine services shall be restorative. If documentation does not support the restorative nature of the treatment, then the service shall not be reimbursed.

(3) Any of the following may provide physical treatment, to the extent that licensure, registration, or certification law allows:

A doctor of medicine.

A doctor of osteopathic medicine and surgery.

(c) A doctor of dental surgery.

(d) A doctor of chiropractic.

(e) A doctor of podiatric medicine and surgery.

(f) A physical therapist.

(g) An occupational therapist.

(4) Only a licensed physical therapist, certified occupational therapist, or licensed practitioner may use procedure codes 97001-97004 to describe the physical medicine and rehabilitation evaluation services. **Job-site evaluations may be paid to**~~Only~~ a certified occupational therapist,~~or~~ a licensed physical therapist**, or a physician. Job-site evaluations for workers' compensation are by report and are described on the bill using** ~~shall perform~~ codes WC500-WC600 ~~for job site evaluation~~.

(5) If a practitioner performs and bills for physical treatment, then the practitioner shall do all of the following:

(a) Perform an initial evaluation.

(b) Develop a treatment plan.

(c) Modify the treatment as necessary.

(d) Perform a discharge evaluation.

The practitioner shall provide the carrier with an initial evaluation and a progress report every 30 calendar days and at discharge. Documentation requirements are the same as the requirements in R 418.10204(2).

(6) A provider shall report procedure code 97750 to describe a functional capacity evaluation. ~~A maximum of 24 units or 6 hours shall be reimbursed by the carrier for the initial evaluation.~~ **The carrier**

**shall reimburse a maximum of 24 units or 6 hours for the initial evaluation.** No**t** more than 4 additional units shall be billed for a re-evaluation occurring within 2 months.

(7) Physical medicine modalities are those agents applied to produce therapeutic changes to tissue and include**,** but are not limited to**,** thermal, acoustic, light, mechanical or electric energy.

(a) Supervised modalities include procedure codes 97010-97028. These codes do not require direct ~~one~~**1**-on-~~one~~**1** patient contact by the provider. These modalities shall be performed in conjunction with a therapeutic procedure including manipulative services or the modalities shall not be reimbursed.

(b) Constant attendance modalities are those procedure codes 97032-97039 that require direct ~~one~~**1**-on-~~one~~**1** patient contact by the provider.

(8) Therapeutic procedure codes 97110-97546 are procedures that effect change through the application of clinical skills and services that attempt to improve function. The physician or therapist shall have direct ~~one~~**1**-on-~~one~~**1** patient contact.

(9) The following provisions apply to the listed modality services:

(a) Whirlpool shall only be reimbursed when done for debridement or as part of a restorative physical treatment program.

(b) Procedure 97010 shall not be reimbursed if the practitioner bills an evaluation and management service on the same date. Procedure code 97010 shall be used to bill hot or cold agents for any of the following reasons:

(i) Hot packs.

(ii) Hydrocollator packs.

(iii) Heat lamps.

(iv) Medconsonolator.

~~(v) Fluidotherapy.~~

(**v**~~i~~) Cryotherapy agents.

(**vi**~~i~~) Ice melts and ice massage.

(**vii**~~i~~) Vaporizing liquids.

(~~ix~~**viii**) Refrigerated units.

(**i**x) Chemical packs.

(**x**~~i~~) Cold packs.

(c) Not more than ~~one~~**1** deep heat procedure shall be billed on the same date of service for the same diagnosis. Deep heat procedures include diathermy, microwave, ultrasound, and phonophoresis.

(d) Phonophoresis shall be billed using procedure code 97035 with modifier code -22 and shall be reimbursed at the same rate as procedure code 97035, plus $2.00 for the active ingredient used in the process. Phonophoresis shall include the electrodes.

(e) Iontophoresis shall include the solution, medication, and the electrodes.

(f) Electrical stimulation shall include the electrodes.

(g) Procedure codes 97032, 97033, and 97035 shall not be reimbursed to a doctor of chiropractic.

**(h) Fluidotherapy, a dry whirlpool treatment, shall be reported using code 97022.**

R 418.10913 Billing for durable medical equipment and supplies.

Rule 913. (1) **Durable medical equipment (DME) and supplies shall be billed using the appropriate descriptor from HCPCS, Medicare's National Level II codes, as referenced in R 418.10107, for the service.**

**(a) If the equipment or supply is billed using an unlisted or not otherwise specified code and the charge exceeds $35.00, then an invoice shall be included with the bill.**

**(2) Initial claims for rental or purchased DME shall be filed with a prescription for medical necessity, including the expected time span the equipment will be required.**

**(3) Durable medical equipment may be billed as a rental or a purchase. If possible, the provider and carrier shall agree before dispensing the item as to whether it should be a rental or a purchased item. Rented DME is considered purchased equipment once the monthly rental allowance exceeds the purchase price or payment of 12 months rental, whichever comes first.**

**If the worker's medical condition changes or does not improve as expected, then the rental may be discontinued in favor of purchase.**

**If death occurs, rental fees for equipment will terminate at the end of the month and additional rental payment shall not be made.**

**(c) The return of rented equipment is the dual responsibility of the worker and the DME supplier. The carrier is not responsible and shall not be required to reimburse for additional rental periods solely because of a delay in equipment returns.** ~~A bill for a medical supply or durable medical equipment shall be accompanied by a prescription, except if dispensed by a health care organization or a facility. The provider shall bill the appropriate code from the "Medicare National Level II HCPCS Codes" as adopted by reference in R 418.10107.~~

~~(2) A bill for durable medical equipment shall include the procedure code, the manufacturer's name, the model number if available and the serial number. Bills for durable medical equipment may be for rental or purchase dependent upon requirements of the injured worker.~~

(~~3~~**4**) A bill for an expendable medical supply shall include the brand name and the quantity dispensed.

(**45**) A bill for a miscellaneous supply, for example; a wig, shoes, or shoe modification, shall be submitted on an invoice if the supplier is not listed as a health care professional.

**R 418.10916** ~~Billing for minor practitioner services performed in an outpatient hospital setting.~~

**Rescinded.**

~~Rule 916. (1) This rule applies to the practitioner component of minor procedures that can safely be performed in a setting other than an outpatient hospital. If a practitioner or health care organization submits a bill for a procedure code listed in table 10916 in the outpatient hospital setting, then modifier code -26 shall be added to the procedure code and the carrier shall pay the maximum allowable fee listed in the manual for the professional portion of the procedure, or, if the professional portion is not listed, then the carrier shall pay 40% of the maximum allowable fee for the procedure.~~

~~(2) This rule shall not apply to any of the following instances:~~

~~(a) During an inpatient, observation stay, or services appropriately performed in the emergency room department.~~

~~(b) For procedures performed during an outpatient surgery.~~

~~(c) If procedures from table 10916 are performed during the course of an outpatient setting in conjunction with a procedure that is appropriately performed in the outpatient setting; for example, a radiology procedure with a myelogram or outpatient surgery.~~

~~(3) This rule shall not apply if the procedure is performed by an emergency room physician granted privileges by the hospital to practice in the emergency room.~~

~~(4) Table 10916 reads as follows:~~

| ~~**TABLE 10916**~~ | | | | |
|---|---|---|---|---|
| ~~10060~~ | ~~20665-20670~~ | ~~30901~~ | ~~65205-65222~~ | ~~92531-92599~~ |
| ~~10120~~ | ~~23065~~ | ~~40800~~ | ~~67700~~ | ~~93740~~ |
| ~~10140~~ | ~~23330~~ | ~~40804~~ | ~~67715-67805~~ | ~~94010-95065~~ |
| ~~10160~~ | ~~24065~~ | ~~40820~~ | ~~67810-67825~~ | ~~95115-95199~~ |

| ~~TABLE 10916~~ | | | | |
|---|---|---|---|---|
| ~~11000~~ | ~~24200~~ | ~~41000-41005~~ | ~~67938~~ | ~~95180~~ |
| ~~11040~~ | ~~25065~~ | ~~41800-41805~~ | ~~69000~~ | ~~95860-95904~~ |
| ~~11100-11101~~ | ~~26010~~ | ~~42300~~ | ~~69020~~ | ~~95930-95937~~ |
| ~~11720-11750~~ | ~~27040~~ | ~~42310~~ | ~~70030-70360~~ | ~~98925-98943~~ |
| ~~11900-11901~~ | ~~27086~~ | ~~45300~~ | ~~70450-71030~~ | ~~99195~~ |
| ~~12001-12004~~ | ~~27323~~ | ~~45330~~ | ~~71100-72220~~ | ~~99201-99215~~ |
| ~~15860~~ | ~~27613~~ | ~~46050~~ | ~~73000-74420~~ | ~~99241-99245~~ |
| ~~16000~~ | ~~28001~~ | ~~50398~~ | ~~74400-74420~~ | ~~90801-90815~~ |
| ~~16020-16030~~ | ~~28190~~ | ~~51000~~ | ~~78300-78699~~ | |
| ~~20500~~ | ~~30000-30100~~ | ~~51700-51710~~ | ~~90901-90911~~ | |
| ~~20520~~ | ~~30200-30210~~ | ~~53600-53661~~ | ~~92002-92014~~ | |
| ~~20550-20610~~ | ~~30300~~ | ~~53670-53675~~ | ~~92230-92504~~ | |

R 418.10922 Hospital billing instructions.

Rule 922. (1) A hospital ~~billing for the facility portion of emergency department, outpatient, and inpatient services,~~ shall bill facility charges on the UB-92 national uniform billing claim form and shall include revenue codes, ICD.9.CM coding, and CPT® codes **to identify the**~~for~~ surgical, radiological, laboratory, medicine, and evaluation and management services. **This rule only requires that the following medical records be attached when appropriate:**

**Emergency room report.**

**The initial evaluation and progress reports every 30 days whenever physical medicine, speech, and hearing services are billed.**

**The anesthesia record when billing for a CRNA or anesthesiologist.**

(2) **A properly completed UB-92 shall not require attachment of medical records except for those in subrule (1) of this rule to be considered for payment. Information required for reimbursement is included on the claim form. A carrier may request any additional records under R 418.101118.** ~~Procedures listed in Table 10922 can safely be performed in an outpatient setting other than an outpatient hospital. When procedures listed in Table 10922 are performed in the outpatient hospital setting, the carrier shall pay the maximum allowable fee listed in the manual for the technical component of the procedure, or 60% of the maximum allowable fee if the technical component is not listed. This rule does not apply to any of the following:~~

~~(a) During the first 10 days of care commencing for an injury.~~

~~(b) During an inpatient or observation stay or services appropriately performed in the emergency room department.~~

~~(c) Procedures performed during the time of an outpatient surgery.~~

~~(d) If a procedure included in Table 10922 is combined with another procedure not found on Table 10922; for example, a radiology procedure with a myelogram or outpatient surgery.~~

~~(3) Table 10922 reads as follows:~~

| ~~TABLE 10922~~ | | | | |
|---|---|---|---|---|
| ~~10060~~ | ~~20665-20670~~ | ~~30901~~ | ~~65205-65222~~ | ~~92531-92599~~ |
| ~~10120~~ | ~~23065~~ | ~~40800~~ | ~~67700~~ | ~~93740~~ |
| ~~10140~~ | ~~23330~~ | ~~40804~~ | ~~67715-67805~~ | ~~94010-95065~~ |
| ~~10160~~ | ~~24065~~ | ~~40820~~ | ~~67810-67825~~ | ~~95115-95199~~ |

| | | | | |
|---|---|---|---|---|
| ~~11000~~ | ~~24200~~ | ~~41000-41005~~ | ~~67938~~ | ~~95180~~ |
| ~~11040~~ | ~~25065~~ | ~~41800-41805~~ | ~~69000~~ | ~~95860-95904~~ |
| ~~11100-11101~~ | ~~26010~~ | ~~42300~~ | ~~69020~~ | ~~95930-95937~~ |
| ~~11720-11750~~ | ~~27040~~ | ~~42310~~ | ~~70030-70360~~ | ~~98925-98943~~ |
| ~~11900-11901~~ | ~~27086~~ | ~~45300~~ | ~~70450-71030~~ | ~~99195~~ |
| ~~12001-12004~~ | ~~27323~~ | ~~45330~~ | ~~71100-72220~~ | ~~99201-99215~~ |
| ~~15860~~ | ~~27613~~ | ~~46050~~ | ~~73000-74020~~ | ~~99241-99245~~ |
| ~~16000~~ | ~~28001~~ | ~~50398~~ | ~~74400-74420~~ | ~~90801-90815~~ |
| ~~16020-16030~~ | ~~28190~~ | ~~51000~~ | ~~78300-78699~~ | |
| ~~20500~~ | ~~30000-30100~~ | ~~51700-51710~~ | ~~90901-90911~~ | |
| ~~20520~~ | ~~30200-30210~~ | ~~53600-53661~~ | ~~92002-92014~~ | |
| ~~20550-20610~~ | ~~30300~~ | ~~53670-53675~~ | ~~92230-92504~~ | |

(**43**) If a hospital clinic, other than an industrial or occupational medicine clinic, bills under a hospital's federal employer identification number, then a hospital clinic facility service shall be identified by using revenue code 510 "clinic."

~~(5) A hospital shall bill the physical, occupational, and speech therapy services on the UB-92 national uniform billing claim form and the hospital shall be paid according to the hospital's payment ratio. The hospital shall provide the carrier with the initial evaluation and progress notes every 30 days.~~

(~~6~~**4**) A hospital system-owned office practice shall **bill services on the CMS 1500 claim form using the office site of service and shall** not bill facility fees**.**

(~~7~~**5**) A hospital or hospital system-owned industrial or occupational clinic providing occupational health services shall **bill services on the CMS 1500 claim form using the office site of service and shall** not bill facility fees.

R 418.101001 General rules for practitioner reimbursement.

Rule 1001. (1) A provider that is authorized to practice in the state of Michigan shall receive the maximum allowable payment in accordance with these rules. A provider shall follow the process specified in these rules for resolving differences with a carrier regarding payment for appropriate health care services rendered to an injured worker. **Reimbursement shall be based upon the site of service. The agency shall publish the maximum allowable payment for a procedure performed in the non-facility setting and the maximum allowable payment for a procedure performed in the facility setting.**

(2) A carrier shall not make a payment for a service unless all required review activities pertaining to that service are completed.

(3) A carrier's payment shall reflect any adjustments in the bill made through the carrier's utilization review program.

(4) A carrier shall pay, adjust, or reject a properly submitted bill within 30 days of receipt. The carrier shall notify the provider on a form entitled "Carrier's Explanation of Benefits" in a format specified by the ~~bureau~~**agency**. A copy shall be sent to the injured worker.

(5) A carrier shall not make a payment for any service ~~which~~ **that** is determined inappropriate by the carrier's professional health care review program.

(6) The carrier shall reimburse the provider a 3% late fee if more than 30 calendar days elapse between a carrier's receipt of a properly submitted bill and a carrier's mailing of the payment.

(7) If a procedure code has a maximum fee of "by report," the provider shall be paid **its** usual and customary charge or the reasonable amount, whichever is less. The carrier shall provide an explanation of its determination that the fee is unreasonable or excessive in accordance with these rules.

R 418.101002 Conversion factors for medical, surgical, and radiology procedure codes**; wage index factors for freestanding surgical outpatient facility**.

Rule 1002. (1) The workers' compensation agency shall determine the conversion factors for medical, surgical, and radiology procedures. The conversion factor shall be used by the workers' compensation agency for determining the maximum allowable payment for medical, surgical, and radiology procedures. The maximum allowable payment shall be determined by multiplying the appropriate conversion factor times the relative value unit assigned to a procedure. The relative value units are listed for the medicine, surgical, and radiology procedure codes in a manual separate from these rules. The manual shall be published annually by the workers' compensation agency using codes adopted from "Physicians' Current Procedural Terminology (CPT®)" as referenced in R 418.10107(a). The workers' compensation agency shall determine the relative values by using information found in the "Medicare RBRVS: The Physicians'Guide" as adopted by reference in R 418.10107(c).

(~~2~~**a**) The conversion factor for medicine, radiology, and surgical procedures shall be $~~48.49~~**49.94** for the year 200~~5~~**6**and shall be effective for dates of service on~~ or after~~ the effective date of these rules.

**(2) The wage index used to determine the maximum allowable payment for a surgery performed in a freestanding surgical outpatient facility for 2006 shall be 1.0678 and shall be effective for dates of service on the effective date of these rules.**

R 418.101003 Reimbursement for "by report" and ancillary procedures.

Rule 1003. (1) If a procedure code does not have a listed relative value**,** or is noted BR, then the carrier shall reimburse the provider's usual and customary charge or reasonable payment, whichever is less, unless otherwise specified in these rules.

(2) The following ancillary services are by report and the provider shall be reimbursed either at the practitioner's usual and customary charge or reasonable payment, whichever is less:

(a) Ambulance services.

(b) Dental services.

Vision and prosthetic optical services.

Hearing aid services.

**Home health services.**

(3) Prescription medication shall be reimbursed at the average wholesale price (AWP) **plus** ~~+~~ a $4.00 dispense fee for each drug, as determined by the Red Book, referenced in R 418.10107~~(c)~~.

(4) Over-the-counter drugs (OTC's), dispensed by a provider other than a pharmacy, shall be dispensed in 10-day quantities and shall be reimbursed at the average wholesale price, as determined by the Red Book, or $2.50, whichever is greater.

(5) ~~Durable medical equipment, supplies, including pre-fabricated splints, shall be reimbursed by the carrier at the average wholesale price, plus not more than 50%, or the provider's usual and customary charge, whichever is less.~~

~~(6)~~ Orthotic and prosthetic procedures, L0100-L8499, **that have** ~~and~~ assigned maximum allowable payments shall be listed in R 418.101504. **Orthotic and prosthetic procedures not listed in R 418.101504 shall be by report.**

**R418.101003b Reimbursement for durable medical equipment and supplies.**

**Rule 1003b. (1) The carrier shall reimburse durable medical equipment (DME) and supplies at Medicare plus 5%. The health care services division shall publish the maximum allowable payments for DME and supplies in the manual separate from these rules.**

**(2) Rented DME shall be identified on the provider's bill by RR. Modifer NU will identify the**

**item as purchased, new.**

**(3) If a DME or supply exceeding $35.00 is not listed in the fee schedule, or if the service is billed with a not otherwise specified code, then reimbursement shall be invoice cost plus a percent mark-up as follows:**
**Invoice cost of $35.01 to $100 shall receive cost plus 50%.**
**Invoice cost of $100.01 to $250.00 shall receive cost plus 30%.**
**Invoice cost of $250.01 to $700.00 shall receive cost plus 25%.**
**Invoice cost of $700.01 or higher shall receive cost plus 20%.**

R 418.101023 Reimbursement for ~~a~~ freestanding surgical outpatient facility service.

Rule 1023. (1) Reimbursement for surgical procedures performed in a freestanding surgical outpatient facility shall be determined by using grouper rates as determined by Medicare and published in the Federal Register. The surgical procedures shall be classified into 1 of 9 groupers, numbered 1-9. An allowable rate is assigned to each grouper and the payment is determined by multiplying the grouper rate times a wage index. The rates for the groupers shall be published by the agency in the Health Care Services Manual. The wage index shall be determined by the workers' compensation agency and shall be published in the Health Care Services Manual.

(2) The state of Michigan workers' compensation health care services rules shall adopt the payment system described in subrule **(**1**)** of this rule adding 80% to the rate reflecting a payment that is 80% higher than Medicare. The geographical wage-index used to calculate the **facility** payment for the surgical procedures shall ~~be 1.0147~~, represent~~ing~~ urban Michigan **and shall be listed in R 418.101002**. The formula for determining the maximum allowable payment (MAP) for a surgical procedure performed in a freestanding surgical outpatient facility shall be as follows: (grouper rate) x (1.8) x (wage-index ~~of 1.0147~~).

(3) When 2 or more surgical procedures are performed in the same operative session, the facility shall be reimbursed at 100% of the maximum allowable payment or the facility's usual and customary charge, whichever is less, for the procedure classified in the highest payment group. Any other surgical procedures performed during the same session shall be reimbursed at 50% of the maximum allowable payment or 50% of the facility's usual and customary charge, whichever is less. A facility may not un-bundle surgical procedure codes when billing the services.

(4) When an eligible procedure is performed bilaterally, each procedure shall be listed on a separate line of the claim form and shall be identified with LT for left and RT for right. At no time shall modifier 50 be used by the facility to describe bilateral procedures.

(5) ~~When~~ **If** an item is implanted during the surgical procedure and the freestanding surgical outpatient facility bills the implant and includes the copy of the invoice, **then** the implant shall be reimbursed at the cost of the implant plus a percent mark-up as follows:

(a) Cost of implant: $1.00 **to** $500.00 shall receive cost **plus**~~=~~ 50%.

(b) Cost of implant: $500.01 **to** $1000.00 shall receive cost **plus**~~=~~ 30%.

(c) Cost of implant: $1000.01 and higher shall receive cost **plus**~~=~~ 25%.

(6) Laboratory services shall be reimbursed by the maximum allowable payment as determined in R 418.101503.

(7) When a radiology procedure is performed intra-operatively, only the technical component shall be billed by the facility and reimbursed by the carrier. The professional component shall be included with the surgical procedure. Preoperative and post-operative radiology services may be globally billed.

(8) When the freestanding surgical facility provides durable medical equipment, the items shall be reimbursed in accord with R 418.101003**B**~~(5)~~.

R 418.101504 Orthotic and prosthetic ~~codes~~ **procedures** and maximum allowable payments.

Rule 1504. The orthotic and prosthetic ~~codes, the L-code~~ procedures that have set fees are listed in this rule. ~~All other L-code procedures shall be listed in Medicare's National Level II, HCPCS as adopted by reference in R 418.10107 and shall be reimbursed as a by report procedure.~~ The maximum allowable fees for the **selected** ~~L-code~~orthotic and prosthetic procedures are listed in the table in this rule. ~~.~~**All other orthotic and prosthetic procedures not included in this rule shall be considered by report procedures.**

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L0120 | ~~cervical, flexible, nonadjustable (foam collar)~~ | $17.29 |
| L0130 | ~~cervical, flexible, thermoplastic collar, molded to patient~~ | $117.02 |
| L0140 | ~~cervical, semi-rigid, adjustable (plastic collar)~~ | $42.00 |
| L0150 | ~~cervical, semi-rigid, adjustable molded chin cup~~ | $74.60 |
| L~~O~~0160 | ~~cervical, semi-rigid, wire frame occipital/mandibular support~~ | $119.82 |
| L0170 | ~~cervical collar, molded to patient model~~ | $796.31 |
| L0172 | ~~cervical collar, semi-rigid, thermoplastic foam, two-piece~~ | $110.00 |
| L0174 | ~~cervical collar, semi-rigid, thermoplastic foam, two-piece with~~ | $194.07 |
| L0180 | ~~cervical, multiple post collar, occipital/mandibular supports,~~ | $314.44 |
| L0190 | ~~cervical, multiple post collar, occipital/mandibular supports,~~ | $407.89 |
| L0200 | ~~cervical, multiple post collar, occipital/mandibular supports,~~ | $430.12 |
| L0210 | ~~thoracic rib belt, custom fitted~~ | $28.85 |
| L0220 | ~~thoracic rib belt, custom fabricated~~ | $90.00 |
| ~~L0500~~ | ~~lso, flexible (lumbo-sacral surgical support), custom fitted~~ | ~~$99.00~~ |
| ~~L0510~~ | ~~lso, flexible (lumbo-sacral surgical support), custom~~ | ~~$214.00~~ |
| ~~L0515~~ | ~~lso, flexible (lumbo-sacral surgical support), elastic type, w/~~ | ~~$176.00~~ |
| ~~L0520~~ | ~~lso, anterior-posterior-lateral control (knight, wilcox types),~~ | ~~$358.03~~ |
| ~~L0530~~ | ~~lso, anterior-posterior control (macausland type), with apron~~ | ~~$359.95~~ |
| ~~L0540~~ | ~~lso, lumbar flexion (williams flexion type)~~ | ~~$387.68~~ |
| ~~L0550~~ | ~~lso, anterior-posterior-lateral control, molded to patient~~ | ~~$1,273.00~~ |
| ~~L0560~~ | ~~lso, ant.-posterior-lateral control, molded to patient model,~~ | ~~$1,590.56~~ |
| ~~L0565~~ | ~~lso, anterior-posterior-lateral control, custom fitted~~ | ~~$902.84~~ |
| ~~L0600~~ | ~~sacroiliac, flexible (sacroiliac surgical support), custom~~ | ~~$60.09~~ |
| ~~L0610~~ | ~~sacroiliac, flexible (sacroiliac surgical support), custom~~ | ~~$224.46~~ |
| ~~L0620~~ | ~~sacroiliac, semi-rigid, (goldthwaite, osgood types), with apron~~ | ~~$367.86~~ |
| L0700 | ~~etlso, ant.-posterior-lateral control, molded to patient model,~~ | $1,779.93 |
| L0710 | ~~etlso, anterior-posterior-lateral-control, molded to patient~~ | $1,882.90 |
| L0810 | ~~halo procedure, cervical halo incorporated into jacket vest~~ | $2,371.87 |
| L0820 | ~~halo procedure, cervical halo incorporated into plaster body~~ | $1,876.79 |
| L0830 | ~~halo procedure, cervical halo incorporated into milwaukee type~~ | $2,829.65 |
| L0860 | ~~addition to halo procedure, magnetic resonance image compatible~~ | $960.00 |
| L0960 | ~~torso support, postsurgical support, pads for postsurgical~~ | $60.01 |
| L0970 | ~~tlso, corset front~~ | $99.30 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L0972 | ~~lso, corset front~~ | $89.42 |
| L0974 | ~~tlso, full corset~~ | $155.56 |
| L0976 | ~~lso, full corset~~ | $138.95 |
| L0978 | ~~axillary crutch extension~~ | $167.24 |
| L0980 | ~~peroneal straps, pair~~ | $15.17 |
| L0982 | ~~stocking supporter grips, set of four (4)~~ | $14.15 |
| L0984 | ~~protective body sock, each~~ | $47.18 |
| L1000 | ~~etlso, inclusive of furnishing initial orthosis, including~~ | $1,763.98 |
| L1010 | ~~addition to etlso or scoliosis orthosis, axilla sling~~ | $58.31 |
| L1020 | ~~addition to etlso or scoliosis orthosis, kyphosis pad~~ | $75.11 |
| L1025 | ~~addition to etlso or scoliosis orthosis, kyphosis pad, floating~~ | $108.35 |
| L1030 | ~~addition to etlso or scoliosis orthosis, lumbar bolster pad~~ | $55.27 |
| L1040 | ~~addition to etlso or scoliosis orthosis, lumbar or lumbar rib~~ | $67.79 |
| L1050 | ~~addition to etlso or scoliosis orthosis, sternal pad~~ | $72.34 |
| L1060 | ~~addition to etlso or scoliosis orthosis, thoracic pad~~ | $83.09 |
| L1070 | ~~addition to etlso or scoliosis orthosis, trapezius sling~~ | $78.18 |
| L1080 | ~~addition to etlso or scoliosis orthosis, outrigger~~ | $48.08 |
| L1085 | ~~addition to etlso or scoliosis orthosis, outrigger, bilateral~~ | $133.74 |
| L1090 | ~~addition to etlso or scoliosis orthosis, lumbar sling~~ | $79.64 |
| L1100 | ~~addition to etlso or scoliosis orthosis, ring flange, plastic~~ | $138.17 |
| L1110 | ~~addition to etlso or scoliosis orthosis, ring flange, plastic~~ | $221.90 |
| L1120 | ~~addition to etlso, scoliosis orthosis, cover for upright, each~~ | $34.51 |
| L1200 | ~~tlso, inclusive of furnishing initial orthosis only~~ | $1,424.25 |
| L1210 | ~~addition to tlso (low profile), lateral thoracic extension~~ | $227.34 |
| L1220 | ~~addition to tlso (low profile), anterior thoracic extension~~ | $192.48 |
| L1230 | ~~addition to tlso (low profile), milwaukee type superstructure~~ | $493.91 |
| L1240 | ~~addition to tlso (low profile), lumbar derotation pad~~ | $67.46 |
| L1250 | ~~addition to tlso (low profile), anterior asis pad~~ | $62.77 |
| L1260 | ~~addition to tlso (low profile), anterior thoracic derotation~~ | $65.74 |
| L1270 | ~~addition to tlso (low profile), abdominal pad~~ | $67.32 |
| L1280 | ~~addition to tlso (low profile), rib gusset (elastic), each~~ | $74.95 |
| L1290 | ~~addition to tlso (low profile), lateral trochanteric pad~~ | $68.29 |
| L1300 | ~~other scoliosis procedure, body jacket molded to patient model~~ | $1,451.36 |
| L1310 | ~~other scoliosis procedure, postoperative body jacket~~ | $1,493.46 |
| L1499 | ~~spinal orthosis, not otherwise classisfied~~ | BR |
| L1500 | ~~thkao, mobility frame (newington, parapodium types)~~ | $1,650.36 |
| L1510 | ~~thkao, standing frame~~ | $828.93 |
| L1520 | ~~thkao, swivel walker~~ | $1,486.64 |
| L1685 | ~~ho, abduction control of hip joint, postop. Hip abduction~~ | $1,033.49 |
| L1686 | ~~ho, abduction control of hip joint, postop. Hip abduction type,~~ | $653.04 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L1800 | ~~ko, elastic with stays, prefabricated, includes fitting and~~ | $43.34 |
| L1810 | ~~ko, elastic with joints, prefabricated, includes fitting and~~ | $81.00 |
| L1815 | ~~ko, elastic or other elastic type material with condylar pad(s)~~ | $63.13 |
| L1820 | ~~ko, elastic or other elastic type material with condylar pads~~ | $103.00 |
| L1825 | ~~ko, elastic knee cap, prefabricated~~ | $35.83 |
| L1830 | ~~ko, immobilizer, canvas longitudinal, prefabricated~~ | $57.01 |
| L1832 | ~~ko, adjustable knee joints, positional orthosis, rigid support,~~ | $480.05 |
| L1834 | ~~ko, without knee joint, rigid, custom fabricated~~ | $674.46 |
| L1840 | ~~ko, derotation, medial-lateral, anterior cruciate ligament,~~ | $798.89 |
| L1844 | ~~ko, single upright, thigh and calf, with adjustable flexion and~~ | $734.88 |
| L1845 | ~~ko, double upright, thigh and calf, with adjustable flexion and~~ | $583.78 |
| L1846 | ~~ko, double upright, thigh and calf, with adjustable flexion and~~ | $985.10 |
| L1850 | ~~ko, Swedish type, prefabricated~~ | $187.57 |
| L1855 | ~~ko, molded plastic, thigh and calf sections, with double~~ | $954.77 |
| L1858 | ~~ko, molded plastic, polycentric knee joints, pneumatic knee~~ | $1,221.93 |
| L1860 | ~~ko, modification of supracondylar prosthetic socket, custom~~ | $1,383.48 |
| L1870 | ~~ko, double upright, thigh and calf lacers, with knee joints,~~ | $909.28 |
| L1880 | ~~ko, double upright, nonmolded thigh and calf cuffs/lacers with~~ | $550.82 |
| L1900 | ~~afo, spring wire, dorsiflexion assist calf band, custom~~ | $234.40 |
| L1902 | ~~afo, ankle gauntlet, prefabricated, includes fitting and~~ | $52.02 |
| L1904 | ~~afo, molded ankle guantlet, custom fabricated~~ | $333.00 |
| L1906 | ~~afo, multi-ligamentus ankle support, prefabricated~~ | $86.17 |
| L1910 | ~~afo, posterior, single bar, clasp attachment to shoe counter,~~ | $174.27 |
| L1920 | ~~afo, single upright with static or adjustable stop (phelps or~~ | $286.29 |
| L1930 | ~~afo, plastic, prefabricated~~ | $175.57 |
| L1940 | ~~afo, plastic, custom fabricated~~ | $429.68 |
| L1945 | ~~afo, molded to patient model, plastic, rigid anterior tibial~~ | $1,145.70 |
| L1950 | ~~afo, spiral, (irm type), plastic, custom fabricated~~ | $647.18 |
| L1960 | ~~afo, posterior solid ankle, plastic, custom fabricated~~ | $530.36 |
| L1970 | ~~afo, plastic, with ankle joint, custom fabricated~~ | $618.24 |
| L1980 | ~~afo, single upright free plantar dorsiflexion, solid stirrup,~~ | $318.88 |
| L1990 | ~~afo, double upright free plantar dorsiflexion, solid stirrup,~~ | $459.09 |
| L2000 | ~~kafo, single upright, free knee, free ankle, solid stirrup,~~ | $881.27 |
| L2010 | ~~kafo, single upright, free ankle, solid stirrup, thigh and calf~~ | $803.35 |
| L2020 | ~~kafo, double upright, free knee, free ankle, solid stirrup,~~ | $1,132.33 |
| L2030 | ~~kafo, double upright, free ankle, solid stirrup, thigh and calf~~ | $880.19 |
| L2036 | ~~kafo, full plastic, double upright, free knee, custom~~ | $2,022.35 |
| L2037 | ~~kafo, full plastic, single upright, free knee, custom~~ | $1,447.16 |
| L2038 | ~~kafo, full plastic, without knee joint, multiaxis ankle, custom~~ | $1,024.83 |
| L2040 | ~~hkafo, torsion control, bilateral rotation straps, pelvic~~ | $154.26 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L2050 | ~~hkafo, torsion control, bilateral torsion cables, hip joint,~~ | $413.88 |
| L2060 | ~~hkafo, torsion control, bilateral torsion cables, ball bearing~~ | $504.44 |
| L2070 | ~~hkafo, torsion control, unilateral rotation straps, pelvic~~ | $116.84 |
| L2080 | ~~hkafo, torsion control, unilateral torsion cable, hip joint,~~ | $312.50 |
| L2090 | ~~hkafo, torsion control, unilateral torsion cable, ball bearing~~ | $380.99 |
| ~~L2102~~ | ~~afo, fracture orthosis, tibial fracture cast orthosis, plaster~~ | ~~$521.09~~ |
| ~~L2104~~ | ~~afo, fracture orthosis, tibial fracture cast orthosis,~~ | ~~$619.81~~ |
| L2106 | ~~afo, fracture orthosis, tibial fracture cast orthosis,~~ | $747.33 |
| L2108 | ~~afo, fracture orthosis, tibial fracture cast orthosis, custom~~ | $1,170.03 |
| L2112 | ~~afo, fracture orthosis, tibial fracture orthosis, soft,~~ | $304.03 |
| L2114 | ~~afo, fracture orthosis, tibial fracture orthosis, semi-rigid,~~ | $440.38 |
| L2116 | ~~afo, fracture orthosis, tibial fracture orthosis, rigid,~~ | $537.16 |
| ~~L2122~~ | ~~kafo, fracture orthosis, femoral fracture cast orthosis,~~ | ~~$891.10~~ |
| ~~L2124~~ | ~~kafo, fracture orthosis, femoral fracture cast orthosis,~~ | ~~$992.94~~ |
| L2126 | ~~kafo, fracture orthosis, femoral fracture cast orthosis,~~ | $1,356.79 |
| L2128 | ~~kafo, fracture orthosis, femoral fracture cast orthosis, custom~~ | $1,498.50 |
| L2132 | ~~kafo, fracture orthosis, femoral fracture cast orthosis, soft,~~ | $525.66 |
| L2134 | ~~kafo, fracture orthosis, femoral fracture cast orthosis, semi-~~ | $803.12 |
| L2136 | ~~kafo, fracture orthosis, femoral fracture cast orthosis, rigid~~ | $878.87 |
| L2180 | ~~addition to lower extremity fracture orthosis, plastic shoe~~ | $101.75 |
| L2182 | ~~addition to lower extremity fracture orthosis, drop lock knee~~ | $79.63 |
| L2184 | ~~addition to lower extremity fracture orthosis, limited motion~~ | $107.63 |
| L2186 | ~~add. To lower extremity fracture orthosis, adjustable motion~~ | $130.80 |
| L2188 | ~~addition to lower extremity fracture orthosis, quadrilateral~~ | $260.22 |
| L2190 | ~~addition to lower extremity fracture orthosis, waist belt~~ | $59.45 |
| L2192 | ~~addition to lower extremity fracture orthosis, hip joint,~~ | $309.80 |
| L2200 | ~~addition to lower extremity, limited ankle motion, each joint~~ | $41.30 |
| L2210 | ~~addition to lower extremity, dorsiflexion assist (plantar~~ | $58.40 |
| L2220 | ~~add. To lower extremity, dorsiflexion and plantar flexion~~ | $71.16 |
| L2230 | ~~addition to lower extremity, split flat caliper stirrups and~~ | $66.67 |
| L2240 | ~~addition to lower extremity, round caliper and plate attachment~~ | $72.66 |
| L2250 | ~~add. To lower extremity, foot plate, molded to patient model,~~ | $308.74 |
| L2260 | ~~addition to lower extremity, reinforced solid stirrup (scott-~~ | $174.17 |
| L2265 | ~~addition to lower extremity, long tongue stirrup~~ | $102.31 |
| L2270 | ~~addition to lower extremity, varus/valgus correction ("t")~~ | $46.67 |
| L2275 | ~~add. To lower extremity, varus/valgus correction, plastic~~ | $103.91 |
| L2280 | ~~addition to lower extremity, molded inner boot~~ | $393.43 |
| L2300 | ~~addition to lower extremity, abduction bar (bilateral hip~~ | $233.93 |
| L2310 | ~~addition to lower extremity, abduction bar, straight~~ | $106.88 |
| L2320 | ~~addition to lower extremity, nonmolded lacer~~ | $178.76 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L2330 | ~~addition to lower extremity, lacer molded to patient model~~ | $341.16 |
| L2335 | ~~addition to lower extremity, anterior swing band~~ | $197.38 |
| L2340 | ~~addition to lower extremity, pre-tibial shell, molded to~~ | $388.32 |
| L2350 | ~~add. To lower extremity, prosthetic type, (bk) socket, molded~~ | $774.19 |
| L2360 | ~~addition to lower extremity, extended steel shank~~ | $44.96 |
| L2370 | ~~addition to lower extremity, patten bottom~~ | $223.04 |
| L2375 | ~~addition to lower extremity, torsion control, ankle joint and~~ | $99.17 |
| L2380 | ~~addition to lower extremity, torsion control, straight knee~~ | $106.97 |
| L2385 | ~~addition to lower extremity, straight knee joint, heavy duty,~~ | $116.38 |
| L2390 | ~~addition to lower extremity, offset knee joint, each joint~~ | $95.11 |
| L2395 | ~~addition to lower extremity, offset knee joint, heavy duty,~~ | $101.95 |
| L2397 | ~~addition to lower extremity orthosis, suspension sleeve~~ | $87.81 |
| L2405 | ~~addition to knee joint, drop lock, each joint~~ | $44.22 |
| L2415 | ~~addition to knee joint, cam lock (swiss, french, bail types),~~ | $159.56 |
| L2425 | ~~addition to knee joint, disc or dial lock for adjustable knee~~ | $158.17 |
| ~~L2435~~ | ~~addition to knee joint, polycentric joint, each joint~~ | ~~$143.80~~ |
| L2492 | ~~addition to knee joint, lift loop for drop lock ring~~ | $88.60 |
| L2500 | ~~add. To lower extremity, thigh/weight bearing, gluteal/ischial~~ | $274.10 |
| L2510 | ~~addition to lower extremity, thigh/weight bearing, quadri-~~ | $631.12 |
| L2520 | ~~add. To lower extremity, thigh/weight bearing, quadri lateral~~ | $374.57 |
| L2525 | ~~addition to lower extremity, thigh/weight bearing, ischial~~ | $873.78 |
| L2526 | ~~addition to lower extremity, thigh/weight bearing, ischial~~ | $595.12 |
| L2530 | ~~addition to lower extremity, thigh/weight bearing, lacer,~~ | $204.14 |
| L2540 | ~~addition to lower extremity, thigh/weight bearing, lacer,~~ | $367.33 |
| L2550 | ~~addition to lower extremity, thigh/weight bearing, high roll~~ | $249.53 |
| L2570 | ~~addition to lower extremity, pelvic control, hip joint, clevis~~ | $413.84 |
| L2580 | ~~addition to lower extremity, pelvic control, pelvic sling~~ | $403.24 |
| L2600 | ~~addition to lower extremity, pelvic control, hip joint, clevis~~ | $178.44 |
| L2610 | ~~addition to lower extremity, pelvic control, hip joint, clevis,~~ | $211.00 |
| L2620 | ~~addition to lower extremity, pelvic control, hip joint, heavy-~~ | $232.31 |
| L2622 | ~~addition to lower extremity, pelvic control, hip joint,~~ | $266.44 |
| L2624 | ~~addition to lower extremity, pelvic control, hip joint,~~ | $287.71 |
| L2627 | ~~addition to lower extremity, pelvic control, plastic, molded to~~ | $1,489.46 |
| L2628 | ~~addition to lower extremity, pelvic control, metal frame,~~ | $1,455.67 |
| L2630 | ~~addition to lower extremity, pelvic control, band and belt,~~ | $215.15 |
| L2640 | ~~addition to lower extremity, pelvic control, band and belt,~~ | $291.98 |
| L2650 | ~~addition to lower extremity, pelvic and thoracic control,~~ | $104.27 |
| L2660 | ~~addition to lower extremity, thoracic control, thoracic band~~ | $161.94 |
| L2670 | ~~addition to lower extremity, thoracic control, paraspinal~~ | $148.21 |
| L2680 | ~~addition to lower extremity, thoracic control, lateral support~~ | $135.96 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L2750 | ~~addition to lower extremity orthosis, plating chrome or nickel,~~ | $72.62 |
| L2760 | ~~addition to lower extremity orthosis, extension, per extension,~~ | $52.79 |
| L2770 | ~~addition to lower extremity orthosis, any material, per bar or~~ | $53.64 |
| L2780 | ~~addition to lower extremity orthosis, non-corrosive finish, per~~ | $58.80 |
| L2785 | ~~addition to lower extremity orthosis, drop lock retainer, each~~ | $27.54 |
| L2795 | ~~addition to lower extremity orthosis, knee control, full~~ | $57.13 |
| L2800 | ~~addition to lower extremity orthosis, knee control, kneecap,~~ | $92.00 |
| L2810 | ~~addition to lower extremity orthosis, knee control, condylar~~ | $67.86 |
| L2820 | ~~addition to lower extremity orthosis, soft interface for molded~~ | $75.46 |
| L2830 | ~~addition to lower extremity orthosis, soft interface for molded~~ | $81.62 |
| L2840 | ~~addition to lower extremity orthosis, tibial length sock,~~ | $30.06 |
| L2850 | ~~addition to lower extremity orthosis, femoral length sock,~~ | $42.15 |
| L2999 | ~~unlisted procedures for lower extremity orthoses~~ | BR |
| L3000 | ~~foot insert, removable, molded to patient model, "ucb" type,~~ | $170.00 |
| L3001 | ~~foot insert, removable, molded to patient model, spenco, each~~ | BR |
| L3002 | ~~foot insert, removable, molded to patient model, plastazote or~~ | $99.00 |
| L3003 | ~~foot insert, removable, molded to patient model, silicone gel,~~ | $99.00 |
| L3010 | ~~foot insert, removable, molded to patient model, longitudinal~~ | $135.00 |
| L3020 | ~~foot insert, removable, molded to patient model,~~ | $99.00 |
| L3030 | ~~foot insert, removable, formed to patient foot, each~~ | BR |
| L3040 | ~~foot, arch support, removable, premolded, longitudinal, each~~ | BR |
| L3050 | ~~foot, arch support, removable, premolded, metatarsal, each~~ | BR |
| L3060 | ~~foot, arch support, removable, premolded,~~ | BR |
| L3070 | ~~foot, arch support, nonremovable, attached to shoe,~~ | BR |
| L3080 | ~~foot, arch support, nonremovable, attached to shoe, metatarsal,~~ | BR |
| L3090 | ~~foot, arch support, nonremovable, attached to shoe, longitudin~~ | BR |
| L3100 | ~~hallus-valgus night dynamic splint~~ | BR |
| L3150 | ~~foot, abduction rotation bar, without shoes~~ | BR |
| L3215 | ~~orthopedic footwear, woman's shoes, oxford~~ | $94.18 |
| L3216 | ~~orthopedic footwear, woman's shoes, depth inlay~~ | $108.00 |
| L3217 | ~~orthopedic footwear, woman's shoes, hightop, depth inlay~~ | $127.00 |
| L3219 | ~~orthopedic footwear, man's shoes, oxford~~ | $102.87 |
| L3221 | ~~orthopedic footwear, man's shoes, depth inlay~~ | $120.00 |
| L3222 | ~~orthopedic footwear, man's shoes, hightop, depth inlay~~ | $150.00 |
| L3230 | ~~orthopedic footwear, custom shoes, depth inlay~~ | $425.00 |
| L3250 | ~~orthopedic footwear, custom molded shoe, removable inner mold,~~ | $381.00 |
| L3251 | ~~foot, shoe molded to patient model, silicone shoe, each~~ | $450.00 |
| L3252 | ~~foot, shoe molded to patient model, plastazote (or similar),~~ | $300.00 |
| L3253 | ~~foot, molded shoe plastazote (or similar), custom fitted, each~~ | $90.00 |
| L3254 | ~~Nonstandard size or width~~ | $38.00 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L3257 | ~~orthopedic footwear, additional charge for split size~~ | $180.00 |
| L3260 | ~~ambulatory surgical boot, each~~ | $60.00 |
| L3265 | ~~plastazote sandal, each~~ | $35.00 |
| L3300 | ~~lift, elevation, heel, tapered to metatarsals, per inch~~ | $42.00 |
| L3310 | ~~lift, elevation, heel and sole, neoprene, per inch~~ | $40.00 |
| L3320 | ~~lift, elevation, heel and sole, cork, per inch~~ | BR |
| L3330 | ~~lift, elevation, metal extension (skate)~~ | $275.00 |
| L3332 | ~~lift, elevation, inside shoe, tapered, up to one-half inch~~ | $18.00 |
| L3334 | ~~lift, elevation, heel, per inch~~ | $25.00 |
| L3340 | ~~heel wedge, sach~~ | $70.00 |
| L3350 | ~~heel wedge~~ | $13.00 |
| L3360 | ~~sole wedge, outside sole~~ | $15.00 |
| L3370 | ~~sole wedge, between sole~~ | $22.00 |
| L3380 | ~~clubfoot wedge~~ | $32.00 |
| L3390 | ~~outflare wedge~~ | $15.00 |
| L3400 | ~~metatarsal bar wedge, rocker~~ | $56.00 |
| L3410 | ~~metatarsal bar wedge, between sole~~ | $64.00 |
| L3420 | ~~full sole and heel wedge, between sole~~ | $32.00 |
| L3430 | ~~heel, counter, plastic reinforced~~ | $44.00 |
| L3440 | ~~heel, counter, leather reinforced~~ | $35.00 |
| L3500 | ~~miscellaneous shoe addition, insole, leather~~ | BR |
| L3510 | ~~miscellaneous shoe addition, insole, rubber~~ | BR |
| L3520 | ~~miscellaneous shoe addition, insole, felt covered with leather~~ | BR |
| L3530 | ~~miscellaneous shoe addition, sole, half~~ | BR |
| L3540 | ~~miscellaneous shoe addition, sole, full~~ | BR |
| L3550 | ~~miscellaneous shoe addition, toe tap, standard~~ | BR |
| L3560 | ~~miscellaneous shoe addition, toe tap, horseshoe~~ | BR |
| L3570 | ~~miscellaneous shoe addition, special extension to instep~~ | BR |
| L3580 | ~~miscellaneous shoe addition, convert instep to velcro closure~~ | BR |
| L3590 | ~~miscellaneous shoe addition, convert firm shoe counter to soft~~ | BR |
| L3595 | ~~miscellaneous shoe addition, march bar~~ | BR |
| L3650 | ~~so, figure of eight design abduction restrainer~~ | $37.82 |
| L3660 | ~~so, figure of eight design abduction restrainer, canvas and~~ | $65.54 |
| L3670 | ~~so, acromio/clavicular (canvas and webbing type)~~ | $72.11 |
| L3700 | ~~eo, elastic with stays~~ | $44.51 |
| L3710 | ~~eo, elastic with metal joints~~ | $78.83 |
| L3720 | ~~eo, double upright with forearm/arm cuffs, free motion~~ | $556.10 |
| L3730 | ~~eo, double upright with forearm/arm cuffs, extension/flexion~~ | $766.44 |
| L3740 | ~~eo, double upright with forearm/arm cuffs, adjustable position~~ | $908.66 |
| L3800 | ~~whfo, short opponens, no attachments~~ | $140.00 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L3805 | ~~whfo, long opponens, no attachment~~ | $256.00 |
| L3810 | ~~whfo, addition to short and long opponens, thumb abduction~~ | $55.09 |
| L3815 | ~~whfo, addition to short and long opponens, second m.p.~~ | $51.16 |
| L3820 | ~~whfo, addition to short and long opponens, i.p. extension~~ | $87.86 |
| L3825 | ~~whfo, addition to short and long opponens, m.p. extension stop~~ | $55.14 |
| L3830 | ~~whfo, addition to short and long opponens, m.p. extension~~ | $71.98 |
| L3835 | ~~whfo, addition to short and long opponens, m.p. spring~~ | $78.02 |
| L3840 | ~~whfo, addition to short and long opponens, spring swivel thumb~~ | $53.45 |
| L3845 | ~~whfo, addition to short and long opponens, thumb i.p. extension~~ | $69.02 |
| L3850 | ~~whfo, addition to short and long opponens, action wrist, with~~ | $98.59 |
| L3855 | ~~whfo, addition to short and long opponens, adjustable m.p.~~ | $99.38 |
| L3860 | ~~whfo, add. To short and long opponens, adjustable m.p. flexion~~ | $136.03 |
| L3900 | ~~whfo, dynamic flexor hinge, reciprocal wrist extension/flexion,~~ | $1,396.48 |
| L3901 | ~~whfo, dynamic flexor hinge, reciprocal wrist extension/flexion,~~ | $1,481.20 |
| L3902 | ~~whfo, external powered, compressed gas~~ | $2,137.19 |
| L3904 | ~~whfo, external powered, electric~~ | $2,354.94 |
| L3906 | ~~whfo, wrist gauntlet, custom fabricated~~ | $384.00 |
| L3907 | ~~whfo, wrist gauntlet with thumb spica, custom fabricated~~ | $406.00 |
| L3908 | ~~whfo, wrist extension control cock-up, prefabricated~~ | $38.21 |
| L3910 | ~~whfo, swanson design~~ | $253.61 |
| L3912 | ~~whfo, flexion glove with elastic finger control~~ | $69.00 |
| L3914 | ~~whfo, wrist extension cock-up, prefabricated~~ | $62.00 |
| L3916 | ~~whfo, wrist extension cock-up, with outrigger, prefabricated~~ | $109.00 |
| L3918 | ~~whfo, knuckle bender, prefabricated~~ | $64.00 |
| L3920 | ~~whfo, knuckle bender, with outrigger, prefabricated~~ | $90.00 |
| L3922 | ~~whfo, knuckle bender, two segment to flex joints, prefabricated~~ | $75.02 |
| L3924 | ~~whfo, oppenheimer, prefabricated~~ | $88.95 |
| L3926 | ~~whfo, thomas suspension, prefabricated~~ | $71.96 |
| L3928 | ~~whfo, finger extension, with clock spring, prefabricated~~ | $43.89 |
| L3930 | ~~whfo, finger extension, with wrist support, prefabricated~~ | $50.94 |
| L3932 | ~~whfo, safety pin, spring wire, prefabricated~~ | $38.12 |
| L3934 | ~~whfo, safety pin, modified, prefabricated~~ | $40.91 |
| L3936 | ~~whfo, palmer, prefabricated~~ | $75.73 |
| L3938 | ~~whfo, dorsal wrist, prefabricated~~ | $74.25 |
| L3940 | ~~whfo, dorsal wrist, with outrigger attachment, prefabricated~~ | $83.41 |
| L3942 | ~~whfo, reverse knuckle bender, prefabricated~~ | $62.14 |
| L3944 | ~~whfo, reverse knuckle bender, with outrigger, prefabricated~~ | $78.52 |
| L3946 | ~~whfo, composite elastic, prefabricated~~ | $59.28 |
| L3948 | ~~whfo, finger knuckle bender, prefabricated~~ | $46.85 |
| L3950 | ~~whfo, combination oppenheimer, with knuckle bender and two~~ | $126.68 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L3952 | ~~whfo, combination oppenheimer, with reverse knuckle and two~~ | $141.50 |
| L3954 | ~~whfo, spreading hand, prefabricated~~ | $77.63 |
| L3960 | ~~sewho, abduction positioning, airplane design, prefabricated~~ | $505.85 |
| L3962 | ~~sewho, abduction positioning, erbs palsy design, prefabricated~~ | $457.52 |
| L3963 | ~~sewho, molded shoulder, arm, forearm, and wrist with~~ | $1,063.83 |
| L3964 | ~~seo, mobile arm support attached to wheelchair, balanced, adj.~~ | $501.52 |
| L3965 | ~~seo, mobile arm support attached to wheelchair, balanced, adj.~~ | $772.40 |
| L3966 | ~~seo, mobile arm support attached to wheelchair, balanced,~~ | $613.07 |
| L3968 | ~~seo, mobile arm support attached to wheelchair, balanced and,~~ | $713.05 |
| L3969 | ~~seo, mobile arm support, monosuspension arm and hand support,~~ | $563.81 |
| L3970 | ~~seo, addition to mobile arm support, elevating proximal arm~~ | $193.93 |
| L3972 | ~~seo, addition to mobile arm support, offset or lateral rocker~~ | $178.22 |
| L3974 | ~~seo, addition to mobile arm support, supinator~~ | $109.98 |
| L3980 | ~~upper extremity fracture orthosis, humeral, prefabricated~~ | $197.13 |
| L3982 | ~~upper extremity fracture orthosis, radius/ulnar, prefabricated~~ | $238.05 |
| L3984 | ~~upper extremity fracture orthosis, wrist, prefabricated~~ | $219.47 |
| L3985 | ~~upper extrem.fracture orthosis, forearm, hand with wrist hinge,~~ | $496.93 |
| L3986 | ~~upper extremity fracture orthosis, combination of humeral,~~ | $476.56 |
| L3995 | ~~addition to upper extremity orthosis, sock, fracture or equal,~~ | $20.85 |
| L3999 | ~~upper limb orthosis, not otherwise specified~~ | BR |
| L4000 | ~~replace girdle for milwaukee orthosis~~ | $1,107.83 |
| L4010 | ~~replace trilateral socket brim~~ | $942.50 |
| L4020 | ~~replace quadrilateral socket brim, molded to patient model~~ | $748.37 |
| L4030 | ~~replace quadrilateral socket brim, custom fitted~~ | $438.67 |
| L4040 | ~~replace molded thigh lacer~~ | $354.66 |
| L4045 | ~~replace nonmolded thigh lacer~~ | $285.01 |
| L4050 | ~~replace molded calf lacer~~ | $358.70 |
| L4055 | ~~replace nonmolded calf lacer~~ | $232.27 |
| L4060 | ~~replace high roll cuff~~ | $276.12 |
| L4070 | ~~replace proximal and distal upright for kafo~~ | $244.52 |
| L4080 | ~~replace metal bands kafo, proximal thigh~~ | $87.00 |
| L4090 | ~~replace metal bands kafofo, calf or distal thigh~~ | $78.46 |
| L4100 | ~~replace leather cuff kafo, proximal thigh~~ | $90.62 |
| L4110 | ~~replace leather cuff kafofo, calf or distal thigh~~ | $73.68 |
| L4130 | ~~replace pretibial shell~~ | $431.00 |
| L4210 | ~~repair of orthotic device, repair or replace minor parts~~ | BR |
| L4350 | ~~pneumatic ankle control splint (e.g., aircast), prefabricated~~ | $58.25 |
| L4360 | ~~pneumatic walking splint (e.g., aircast), prefabricated~~ | $180.43 |
| L4370 | ~~pneumatic full leg splint (e.g., aircast), prefabricated~~ | $123.02 |
| L4380 | ~~pneumatic knee splint (e.g., aircast), prefabricated~~ | $69.99 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L5000 | ~~partial foot, shoe insert with longitudinal arch, toe filler~~ | $400.00 |
| L5010 | ~~partial foot, molded socket, ankle height, with toe filler~~ | $1,217.00 |
| L5020 | ~~partial foot, molded socket, tibial tubercle height, with toe~~ | $2,226.00 |
| L5050 | ~~ankle, symes, molded socket, sach foot~~ | $2,231.00 |
| L5060 | ~~ankle, symes, metal frame, molded leather socket, articulated~~ | $2,691.00 |
| L5100 | ~~below knee, molded socket, shin, sach foot~~ | $2,499.00 |
| L5105 | ~~below knee, plastic socket, joints and thigh lacer, sach foot~~ | $3,215.69 |
| L5150 | ~~knee disarticulation (or through knee), molded socket, external~~ | $3,599.00 |
| L5160 | ~~knee disarticulation, (or through knee), molded socket, bent,~~ | $3,869.00 |
| L5200 | ~~above knee, molded socket, single axis constant friction knee,~~ | $3,081.00 |
| L5210 | ~~above knee, short prosthesis, no knee joint ("stubbies"), with,~~ | $2,332.00 |
| L5220 | ~~above knee, short prosthesis, no knee joint ("stubbies"),~~ | $2,592.00 |
| L5230 | ~~above knee, for proximal femoral focal deficiency, constant~~ | $4,198.00 |
| L5250 | ~~hip dis-articulation, canadian type; molded socket, hip joint,~~ | $4,802.00 |
| L5270 | ~~hip dis-articulation, tilt table type, molded socket, locking~~ | $4,760.75 |
| L5280 | ~~hemipelvectomy, canadian type; molded socket, hip joint, single~~ | $4,713.13 |
| L5301 | ~~below knee, molded socket, shin, sach foot, endoskeletal system~~ | $2,612.75 |
| L5311 | ~~knee disarticulation, molded socket, enternal knee joints, shin~~ | $3,859.00 |
| L5321 | ~~above knee, molded socket, open end, sach foot, endoskeletal,~~ | $3,815.00 |
| L5331 | ~~hip disarticlation, canadian type, molded socket, endoskeletal~~ | $5,450.14 |
| L5341 | ~~hemipelvectomy, canadian type, molded socket, endoskeletal, hip~~ | $5,823.31 |
| L5400 | ~~immediate post-surgical or early fitting, application of~~ | $1,261.00 |
| L5410 | ~~immediate post-surgical or early fitting, application of~~ | $333.00 |
| L5420 | ~~immediate post-surgical or early fitting, application of~~ | $1,547.71 |
| L5430 | ~~immediate post-surgical or early fitting, application of~~ | $420.12 |
| L5450 | ~~immediate post-surgical or early fitting, application of non-~~ | $363.27 |
| L5460 | ~~immediate post-surgical or early fitting, application of non-~~ | $476.46 |
| L5500 | ~~initial below knee "ptb" type socket, "usmc" or equal pylon, no~~ | $1,262.00 |
| L5505 | ~~initial, above knee-knee dis-articulation, ischial level~~ | $1,685.00 |
| L5510 | ~~preparatory, below knee "ptb" type socket, sach foot, plaster~~ | $1,535.00 |
| L5520 | ~~preparatory, below knee "ptb" type socket, sach foot,~~ | $1,347.00 |
| L5530 | ~~preparatory, below knee "ptb" type socket, no cover, sach foot,~~ | $1,752.00 |
| L5535 | ~~preparatory, below knee "ptb" type socket, no cover, sach foot,~~ | $1,569.73 |
| L5540 | ~~preparatory, below knee "ptb" type socket, no cover, sach foot,~~ | $1,765.00 |
| L5570 | ~~preparatory, above knee-knee disarticulation, ischial~~ | $1,840.00 |
| L5580 | ~~preparatory, above knee-knee disarticulation, ischial~~ | $2,352.00 |
| L5585 | ~~preparatory, above knee-knee disarticulation, ischial~~ | $2,696.00 |
| L5590 | ~~preparatory, above knee-knee disarticulation, ischial~~ | $2,225.22 |
| L5595 | ~~preparatory, hip disarticulation-hemipelvectomy, pylo~~ | $3,727.16 |
| L5600 | ~~preparatory, hip disarticulation-hemipelvectomy, pylon,~~ | $4,115.89 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L5610 | ~~addition to lower extremity, endoskeletal above~~ | $1,916.47 |
| L5611 | ~~addition to lower extremity, endoskeletal system above~~ | $1,491.40 |
| L5613 | ~~addition to lower extremity, endoskeletal above, 4ar lin~~ | $2,268.50 |
| L5614 | ~~addition to lower extremity, above knee - knee disarticula~~ | $3,508.49 |
| L5616 | ~~addition to lower extremity, above knee, universal mult~~ | $1,257.18 |
| L5618 | ~~addition to lower extremity, test socket, symes~~ | $654.32 |
| L5620 | ~~addition to lower extremity, test socket, below knee~~ | $533.41 |
| L5622 | ~~addition to lower extremity, test socket, knee disarticulation~~ | $729.81 |
| L5624 | ~~addition to lower extremity, test socket, above knee~~ | $635.07 |
| L5626 | ~~addition to lower extremity, test socket, hip disarticulation~~ | $777.71 |
| L5628 | ~~addition to lower extremity, test socket, hemipelvectomy~~ | $775.86 |
| L5629 | ~~addition to lower extremity, below knee, acrylic socket~~ | $220.64 |
| L5630 | ~~addition to lower extremity, symes type, expandable wall socket~~ | $415.43 |
| L5631 | ~~addition to lower extremity, above knee or~~ | $305.04 |
| L5632 | ~~addition to lower extremity, symes type, "ptb" brim d~~ | $205.52 |
| L5634 | ~~addition to lower extremity, symes type, posterior opening~~ | $281.57 |
| L5636 | ~~addition to lower extremity, symes type, medial opening socket~~ | $235.86 |
| L5637 | ~~addition to lower extremity, below knee, total contact~~ | $294.15 |
| L5638 | ~~addition to lower extremity, below knee, leather socket~~ | $450.48 |
| L5639 | ~~addition to lower extremity, below knee, wood socket~~ | $1,037.83 |
| L5640 | ~~addition to lower extremity, knee disarticulation, leather~~ | $591.89 |
| L5642 | ~~addition to lower extremity, above knee, leather socket~~ | $573.50 |
| L5643 | ~~addition to lower extremity, hip disarticulation, flexible~~ | $1,440.73 |
| L5644 | ~~addition to lower extremity, above knee, wood socket~~ | $546.73 |
| L5645 | ~~addition to lower extremity, below knee, flexible inner socket,~~ | $748.26 |
| L5646 | ~~addition to lower extremity, below knee, air cushion socket~~ | $507.18 |
| L5647 | ~~addition to lower extremity, below knee, suction socket~~ | $736.32 |
| L5648 | ~~addition to lower extremity, above knee, air cushion socket~~ | $609.43 |
| L5649 | ~~addition to lower extremity, ischial containment/narrow m-l~~ | $1,882.67 |
| L5650 | ~~addition to lower extremity, total contact, above knee or knee~~ | $451.88 |
| L5651 | ~~addition to lower extremity, above knee, flexible inner socket,~~ | $1,111.63 |
| L5652 | ~~addition to lower extremity, suction suspension, above knee or~~ | $606.28 |
| L5653 | ~~addition to lower extremity, knee disarticulation, expandable~~ | $661.74 |
| L5654 | ~~addition to lower extremity, socket insert, symes (kemblo,~~ | $426.49 |
| L5655 | ~~addition to lower extremity, socket insert, below knee (kemblo,~~ | $348.15 |
| L5656 | ~~addition to lower extremity, socket insert, knee~~ | $343.38 |
| L5658 | ~~addition to lower extremity, socket insert, above knee (kemblo,~~ | $336.56 |
| ~~L5660~~ | ~~addition to lower extremity, socket inset, symes, silicone gel~~ | ~~$533.65~~ |
| L5661 | ~~addition to lower extremity, socket insert, multidurometer,~~ | $563.29 |
| ~~L5662~~ | ~~addition to lower extremity, socket insert, below knee,~~ | ~~$489.35~~ |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| ~~L5663~~ | ~~addition to lower extremity, socket insert, knee~~ | ~~$637.86~~ |
| ~~L5664~~ | ~~addition to lower extremity, socket insert, above knee,~~ | ~~$614.54~~ |
| L5665 | ~~addition to lower extremity, socket insert, multidurometer,~~ | $473.96 |
| L5666 | ~~addition to lower extremity, below knee, cuff suspension~~ | $64.80 |
| L5668 | ~~addition to lower extremity, below knee, molded distal cushion~~ | $93.48 |
| L5670 | ~~addition to lower extremity, below knee, molded supracondylar~~ | $300.76 |
| L5672 | ~~addition to lower extremity, below knee, removable medial brim~~ | $276.02 |
| ~~L5674~~ | ~~addition to lower extremity, below knee, latex sleeve~~ | ~~$48.81~~ |
| ~~L5675~~ | ~~addition to lower extremity, below knee, latex sleeve~~ | ~~$66.16~~ |
| L5676 | ~~addition to lower extremity, below knee, knee joints, single~~ | $335.44 |
| L5677 | ~~addition to lower extremity, below knee, knee joints,~~ | $456.40 |
| L5678 | ~~addition to lower extremity, below knee, joint covers, pair~~ | $30.33 |
| L5680 | ~~addition to lower extremity, below knee, thigh lacer, nonmolded~~ | $281.74 |
| L5682 | ~~addition to lower extremity, below knee, thigh lacer,~~ | $578.90 |
| L5684 | ~~addition to lower extremity, below knee, fork strap~~ | $44.54 |
| L5686 | ~~addition to lower extremity, below knee, back check (extension~~ | $47.29 |
| L5688 | ~~addition to lower extremity, below knee, waist belt, webbing~~ | $56.53 |
| L5690 | ~~addition to lower extremity, below knee, waist belt, padded and~~ | $90.58 |
| L5692 | ~~addition to lower extremity, above knee, pelvic control belt,~~ | $123.00 |
| L5694 | ~~addition to lower extremity, above knee, pelvic control belt,~~ | $167.93 |
| L5695 | ~~addition to lower extremity, above knee, pelvic control, sleeve~~ | $150.96 |
| L5696 | ~~addition to lower extremity, above knee or knee~~ | $171.28 |
| L5697 | ~~addition to lower extremity, above knee or knee~~ | $74.32 |
| L5698 | ~~addition to lower extremity, above knee or knee~~ | $96.56 |
| L5699 | ~~all lower extremity prostheses, shoulder harness~~ | $142.40 |
| L5700 | ~~Replacement, socket, below knee, molded to patient model~~ | $2,534.95 |
| L5701 | ~~Replacement, socket, above knee/knee disarticulation including~~ | $3,147.36 |
| L5702 | ~~Replacement, socket, hip disarticulation, including hip joint,~~ | $4,021.66 |
| L5704 | ~~Replacement, custom shaped protective cover, below knee~~ | $436.72 |
| L5705 | ~~Replacement, custom shaped protective cover, above knee~~ | $800.64 |
| L5706 | ~~Replacement, custom shaped protective cover, knee~~ | $780.94 |
| L5707 | ~~Replacement, custom shaped protective cover, hip~~ | $1,049.19 |
| L5710 | ~~addition, exoskeletal knee-shin system, single axis, manual~~ | $332.93 |
| L5711 | ~~addition, exoskeletal knee-shin system, single axis, manual lo~~ | $483.34 |
| L5712 | ~~addition, exoskeletal knee-shin system, single axis, friction~~ | $398.87 |
| L5714 | ~~addition, exoskeletal knee-shin system, single axis, variable~~ | $387.18 |
| L5716 | ~~addition, exoskeletal knee-shin system, polycentric mechanical~~ | $674.65 |
| L5718 | ~~addition, exoskeletal knee-shin system, polycentric, friction c~~ | $843.24 |
| L5722 | ~~addition, exoskeletal knee-shin system, single axis, pneumatic~~ | $835.75 |
| L5724 | ~~addition, exoskeletal knee-shin system, single axis, fluid~~ | $1,397.20 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L5726 | ~~addition, exoskeletal knee-shin system, single axis, external~~ | $1,610.24 |
| L5728 | ~~addition, exoskeletal knee-shin system, single axis, fluid~~ | $1,851.35 |
| L5780 | ~~addition, exoskeletal knee-shin system, single axis,~~ | $1,059.79 |
| L5785 | ~~addition, exoskeletal system, below knee, ultra-light material~~ | $480.92 |
| L5790 | ~~addition, exoskeletal system, above knee, ultra-light material~~ | $665.57 |
| L5795 | ~~addition, exoskeletal system, hip disarticulation, ultra-light~~ | $993.86 |
| L5810 | ~~addition, endoskeletal knee-shin system, single axis, manual~~ | $450.67 |
| L5811 | ~~addition, endoskeletal knee-shin system, single axis, manual~~ | $675.10 |
| L5812 | ~~addition, endoskeletal knee-shin system, single axis friction~~ | $495.00 |
| L5816 | ~~addition, endoskeletal knee-shin system, polycentric mechanical~~ | $710.00 |
| L5818 | ~~addition, endoskeletal knee-shin system, polycentric, friction~~ | $888.94 |
| L5822 | ~~addition, endoskeletal knee-shin system, single axis, pneumatic~~ | $1,576.30 |
| L5824 | ~~addition, endoskeletal knee-shin system, single axis, fluid~~ | $1,400.00 |
| L5828 | ~~addition, endoskeletal knee-shin system, single axis, fluid~~ | $2,263.39 |
| L5830 | ~~addition, endoskeletal knee-shin system, single axis,~~ | $1,756.46 |
| L5840 | ~~addition, endoskeletal knee-shin system, single axis,~~ | $1,980.00 |
| L5850 | ~~addition, endoskeletal system, above knee or hip~~ | $118.42 |
| L5855 | ~~addition, endoskeletal system, hip disarticulation, mechanical~~ | $285.88 |
| L5910 | ~~addition, endoskeletal system, below knee, alignable system~~ | $335.26 |
| L5920 | ~~addition, endoskeletal system, above knee or hip~~ | $491.14 |
| L5925 | ~~addition, endoskeletal system, above knee, knee disarticulation~~ | $280.00 |
| L5940 | ~~addition, endoskeletal system, below knee, ultra-light material~~ | $464.30 |
| L5950 | ~~addition, endoskeletal system, above knee, ultra-light material~~ | $720.17 |
| L5960 | ~~addition, endoskeletal system, hip disarticulation, ultra-light~~ | $892.37 |
| L5962 | ~~addition, endoskeletal system, below knee, flexible protective~~ | $490.00 |
| L5964 | ~~addition, endoskeletal system, above knee, flexible protective~~ | $798.56 |
| L5966 | ~~addition endoskeletal system, hip disarticulation, flexible~~ | $1,035.31 |
| L5970 | ~~all lower extremity prostheses, foot, external keel, sach foot~~ | $187.99 |
| L5972 | ~~all lower extremity prostheses, flexible keel foot (safe, sten,~~ | $326.23 |
| L5974 | ~~all lower extremity prostheses, foot, single axis ankle/foot~~ | $215.70 |
| L5976 | ~~all lower extremity prostheses, energy storing foot (seattl~~ | $451.39 |
| L5978 | ~~all lower extremity prostheses, foot, multixial ankle/foot~~ | $270.13 |
| L5979 | ~~all lower extremity prostheses, multixial ankle/foot, dynami~~ | $2,090.00 |
| L5980 | ~~all lower extremity prostheses, flex-foot system~~ | $2,917.79 |
| L5981 | ~~all lower extremity prostheses, flex-walk system or equal~~ | $2,382.65 |
| L5982 | ~~all exoskeletal lower extremity prostheses, axial rotation unit~~ | $535.13 |
| L5984 | ~~all endoskeletal lower extremity prostheses, axial rotatio~~ | $527.33 |
| L5986 | ~~all lower extremity prostheses, multixial rotation unit ("mcp~~ | $586.57 |
| L5999 | ~~lower extremity prosthesis, not otherwise classified~~ | BR |
| L6000 | ~~partial hand, robinids, thumb remaining (or equal)~~ | $1,229.90 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L6010 | ~~partial hand, robinids, little and/or ring finger remaining~~ | $1,368.70 |
| L6020 | ~~partial hand, robon aids, no finger remaining (or equal)~~ | $1,276.09 |
| L6050 | ~~wrist disarticulation, molded socket, flexible elbow hinges~~ | $2,263.00 |
| L6055 | ~~wrist disarticulation, molded socket with expandable interface,~~ | $2,450.75 |
| L6100 | ~~below elbow, molded socket, flexible elbow hinge, triceps pad~~ | $2,229.00 |
| L6110 | ~~below elbow, molded socket (muenster or northwestern suspension~~ | $2,284.04 |
| L6120 | ~~below elbow, molded double wall split socket, step-up hinges,~~ | $2,202.07 |
| L6130 | ~~below elbow, molded double wall split socket, stump activated~~ | $2,396.27 |
| L6200 | ~~elbow disarticulation, molded socket, outside locking hinge,~~ | $2,982.00 |
| L6205 | ~~elbow disarticulation, molded socket with expandable interface,~~ | $3,370.85 |
| L6250 | ~~above elbow, molded double wall socket, internal locking elbow,~~ | $3,267.79 |
| L6300 | ~~shoulder disarticulation, molded socket, shoulder bulkhead,~~ | $3,448.64 |
| L6310 | ~~shoulder disarticulation, passive restoration (complete~~ | $2,809.00 |
| L6320 | ~~shoulder disarticulation, passive restoration (shoulder cap~~ | $1,581.89 |
| L6350 | ~~interscapular thoracic, molded socket, shoulder bulkhead,~~ | $3,625.73 |
| L6360 | ~~interscapular thoracic, passive restoration (complete~~ | $2,948.39 |
| L6370 | ~~interscapular thoracic, passive restoration (shoulder cap only)~~ | $1,880.09 |
| L6380 | ~~immediate post-surgical or early fitting, application of~~ | $1,130.00 |
| L6382 | ~~immediate post-surgical or early fitting, application of~~ | $1,520.00 |
| L6384 | ~~immediate post-surgical or early fitting, application of~~ | $1,764.86 |
| L6386 | ~~immediate post-surgical or early fitting, each additional cast~~ | $371.72 |
| L6388 | ~~immediate post-surgical or early fitting, application of rigid~~ | $406.94 |
| L6400 | ~~below elbow, molded socket, endoskeletal system, including soft~~ | $2,147.89 |
| L6450 | ~~elbow disarticulation, molded socket, endoskeletal system,~~ | $2,853.88 |
| L6500 | ~~above elbow, molded socket, endoskeletal system, including soft~~ | $2,856.22 |
| L6550 | ~~shoulder disarticulation, molded socket, endoskeletal system,~~ | $3,529.76 |
| L6570 | ~~interscapular thoracic, molded socket, endoskeletal system,~~ | $4,051.49 |
| L6580 | ~~Preparatory, wrist disarticulation or below elbow, single wall~~ | $1,446.95 |
| L6582 | ~~Preparatory, wrist disarticulation or below elbow, single wall~~ | $1,273.99 |
| L6584 | ~~Preparatory, elbow disarticulation or above elbow, single wa~~ | $1,894.64 |
| L6586 | ~~Preparatory, elbow disarticulation or above elbow, single wa~~ | $1,734.41 |
| L6588 | ~~Preparatory, shoulder disarticulation or interscapul~~ | $2,616.40 |
| L6590 | ~~Preparatory, shoulder disarticulation or interscapul~~ | $2,435.32 |
| L6600 | ~~upper extremity additions, polycentric hinge, pair~~ | $173.63 |
| L6605 | ~~upper extremity additions, single pivot hinge, pair~~ | $171.44 |
| L6610 | ~~upper extremity additions, flexible metal hinge, pair~~ | $154.12 |
| L6615 | ~~upper extremity addition, disconnect locking wrist unit~~ | $160.80 |
| L6616 | ~~upper extremity addition, additional disconnect insert f~~ | $60.04 |
| L6620 | ~~upper extremity addition, flexion-friction wrist unit~~ | $280.66 |
| L6623 | ~~upper extremity addition, spring assisted rotational wrist un~~ | $593.77 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L6625 | ~~upper extremity addition, rotation wrist unit with cable lock~~ | $492.31 |
| L6628 | ~~upper extremity addition, quick disconnect hook adapter, or equal~~ | $443.44 |
| L6629 | ~~upper extremity addition, quick disconnect lamination coll~~ | $135.43 |
| L6630 | ~~upper extremity addition, stainless steel, any wrist~~ | $529.70 |
| L6632 | ~~upper extremity addition, latex suspension sleeve, each~~ | $60.14 |
| L6635 | ~~upper extremity addition, lift assist for elbow~~ | $185.00 |
| L6637 | ~~upper extremity addition, nudge control elbow lock~~ | $339.89 |
| L6640 | ~~upper extremity addition, shoulder abduction joint, pair~~ | $259.30 |
| L6641 | ~~upper extremity addition, excursion amplifier pulley type~~ | $148.50 |
| L6642 | ~~upper extremity addition, excursion amplifier level type~~ | $201.28 |
| L6645 | ~~upper extremity addition, shoulder flexion abduction join~~ | $295.49 |
| L6650 | ~~upper extremity addition, shoulder universal joint, each~~ | $313.32 |
| L6655 | ~~upper extremity addition, standard control cable, extra~~ | $69.53 |
| L6660 | ~~upper extremity addition, heavy duty control cable~~ | $84.96 |
| L6665 | ~~upper extremity addition, teflon, or equal cable lining~~ | $42.64 |
| L6670 | ~~upper extremity addition, hook to hand, cable adapter~~ | $44.39 |
| L6672 | ~~upper extremity addition, harness, chest or shoulder, saddle~~ | $156.07 |
| L6675 | ~~upper extremity addition, harness, figure of eight type, for~~ | $111.16 |
| L6676 | ~~upper extremity addition, harness, figure of ei~~ | $112.26 |
| L6680 | ~~upper extremity addition, test socket, wrist disar~~ | $396.63 |
| L6682 | ~~upper extremity addition, test socket, elbow disar~~ | $492.52 |
| L6684 | ~~upper extremity addition, test socket, shoulder di~~ | $575.62 |
| L6686 | ~~upper extremity addition, suction socket~~ | $546.47 |
| L6687 | ~~upper extremity addition, frame type socket, b~~ | $485.00 |
| L6688 | ~~upper extremity addition, frame type socket, a~~ | $490.36 |
| L6689 | ~~upper extremity addition, frame type soc~~ | $623.71 |
| L6690 | ~~upper extremity addition, frame type socket,~~ | $636.49 |
| L6691 | ~~upper extremity addition, removable insert, each~~ | $375.00 |
| L6692 | ~~upper extremity addition, silicone gel insert or equal, each~~ | $517.66 |
| L6700 | ~~terminal device, hook dorrance, or equal, model #3~~ | $480.17 |
| L6705 | ~~terminal device, hook dorrance, or equal, model #5~~ | $281.90 |
| L6710 | ~~terminal device, hook, dorrance, or equal, model #5x~~ | $456.45 |
| L6715 | ~~terminal device, hook, dorrance, or equal, model #5xa~~ | $435.00 |
| L6720 | ~~terminal device, hook, dorrance, or equal, model #6~~ | $789.68 |
| L6725 | ~~terminal device, hook, dorrance, or equal, model #7~~ | $465.24 |
| L6730 | ~~terminal device, hook, dorrance, or equal, model #7lo~~ | $591.50 |
| L6735 | ~~terminal device, hook, dorrance, or equal, model #8~~ | $275.82 |
| L6740 | ~~terminal device, hook, dorrance, or equal, model #8x~~ | $359.60 |
| L6745 | ~~terminal device, hook, dorrance, or equal, model #88x~~ | $329.03 |
| L6750 | ~~terminal device, hook, dorrance, or equal, model #10p~~ | $325.22 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L6755 | ~~terminal device, hook, dorrance, or equal, model #10x~~ | $324.30 |
| L6765 | ~~terminal device, hook, dorrance, or equal, model #12p~~ | $338.82 |
| L6770 | ~~terminal device, hook, dorrance, or equal, model #99x~~ | $326.63 |
| L6775 | ~~terminal device, hook, dorrance, or equal, model #555~~ | $387.01 |
| L6780 | ~~terminal device, hook, dorrance, or equal, model #ss555~~ | $413.69 |
| L6790 | ~~terminal device, hook, accu hook or equal~~ | $418.27 |
| L6795 | ~~terminal device, hook, 2 load or equal~~ | $1,145.60 |
| L6800 | ~~terminal device, hook, aprl vc or equal~~ | $937.88 |
| L6805 | ~~terminal device, modifier wrist flexion unit~~ | $314.94 |
| L6806 | ~~terminal device, hook, trs grip, vc~~ | $1,219.79 |
| L6809 | ~~terminal device, hook, trs super sport, passive~~ | $343.46 |
| L6810 | ~~terminal device, pincher tool, otto bock or equal~~ | $172.66 |
| L6825 | ~~terminal device, hand, dorrance, vo~~ | $955.02 |
| L6830 | ~~terminal device, hand, aprl, vc~~ | $1,253.51 |
| L6835 | ~~terminal device, hand, sierra, vo~~ | $1,091.93 |
| L6840 | ~~terminal device, hand, becker imperial~~ | $758.59 |
| L6845 | ~~terminal device, hand, becker lock grip~~ | $704.22 |
| L6850 | ~~terminal device, hand, becker pylite~~ | $637.78 |
| L6855 | ~~terminal device, hand, robinids, vo~~ | $811.19 |
| L6860 | ~~terminal device, hand, robinids, vo soft~~ | $615.22 |
| L6865 | ~~terminal device, hand, passive hand~~ | $301.42 |
| L6875 | ~~terminal device, hand, bock vc~~ | $719.47 |
| L6880 | ~~terminal device, hand, bock vo~~ | $466.76 |
| L6890 | ~~terminal device, glove for above hands, production glove~~ | $190.00 |
| L6895 | ~~terminal device, glove for above hands, custom glove~~ | $732.76 |
| L6900 | ~~hand restoration (casts, shading and measuremen~~ | $1,989.50 |
| L6905 | ~~hand restoration (casts, shading and measuremen~~ | $1,990.23 |
| L6910 | ~~hand restoration (casts, shading and measuremen~~ | $2,001.88 |
| L6915 | ~~hand restoration (shading and measuremen~~ | $774.57 |
| L6920 | ~~wrist disarticulation, external power, self-su~~ | $6,434.34 |
| L6925 | ~~wrist disarticulation, external power, self-su~~ | $6,874.02 |
| L6930 | ~~below elbow, external power, self-suspended inner socket,~~ | $6,197.18 |
| L6935 | ~~below elbow, external power, self-suspended inner socket,~~ | $6,841.72 |
| L6940 | ~~elbow disarticulation, external power, molded inner socket,~~ | $8,002.61 |
| L6945 | ~~elbow disarticulation, external power, molded inner socket,~~ | $8,927.91 |
| L6950 | ~~above elbow, external power, molded inner socket, removable~~ | $7,987.74 |
| L6955 | ~~above elbow, external power, molded inner socket, removable~~ | $9,263.27 |
| L6960 | ~~shoulder disarticulation, external power, molded inner socket,~~ | $9,744.62 |
| L6965 | ~~shoulder disarticulation, external power, molded inner~~ | $11,544.00 |
| L6970 | ~~interscapular-thoracic, external power, molded inner~~ | $12,356.57 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L6975 | ~~interscapular-thoracic, external power, molded inner~~ | $13,619.84 |
| L7010 | ~~electronic hand, otto bock, steeper or equal, switch controlled~~ | $3,174.94 |
| L7015 | ~~electronic hand, system teknik, variety village or equal, swite~~ | $5,611.94 |
| L7020 | ~~electronic greifer, otto bock or equal, switch controlled~~ | $3,466.69 |
| L7025 | ~~electronic hand, otto bock or equal, myoelectronically~~ | $3,428.95 |
| L7030 | ~~electronic hand, system teknik, variety village or equal,~~ | $5,488.37 |
| L7035 | ~~electronic greifer, otto bock or equal, myoelectronically~~ | $3,648.62 |
| L7040 | ~~prehensile actuator, hosmer or equal, switch controlled~~ | $2,609.59 |
| L7170 | ~~electronic elbow, boston or equal, switch controlled~~ | $5,427.59 |
| L7180 | ~~electronic elbow, boston, utah or equal, myoelectro~~ | $29,891.81 |
| L7260 | ~~electronic wrist rotator, otto bock or equal~~ | $1,821.71 |
| L7261 | ~~electronic wrist rotator, for utah arm~~ | $3,610.95 |
| L7266 | ~~servo control, steeper or equal~~ | $916.48 |
| L7272 | ~~analogue control, unb or equal~~ | $1,812.94 |
| L7274 | ~~proportional control, 12 volt, utah or equal~~ | $5,621.72 |
| L7360 | ~~six volt battery, otto bock or equal, each~~ | $240.00 |
| L7362 | ~~battery charger, six volt, otto bock or equal~~ | $242.00 |
| L7364 | ~~twelve volt battery, utah or equal, each~~ | $392.77 |
| L7366 | ~~battery charger, 12 volt, utah or equal~~ | $540.20 |
| L7499 | ~~unlisted procedures for upper extremity prosthesis~~ | BR |
| L7500 | ~~repair of prosthetic device, hourly rate~~ | $80.00 |
| L7510 | ~~repair prosthetic device, repair or replace minor parts~~ | BR |
| L8100 | ~~gradient compression stocking, below knee, medium weight, each~~ | BR |
| L8110 | ~~gradient compression stocking, below knee, heavy weight, each~~ | BR |
| L8120 | ~~gradient compression stocking, (linton or equal), each thigh~~ | BR |
| L8130 | ~~gradient compression stocking, thigh length~~ | BR |
| L8140 | ~~gradient compression stocking, thigh length~~ | BR |
| L8150 | ~~gradient compression stocking, thigh length~~ | BR |
| L8160 | ~~gradient compression stocking, full-length, each~~ | BR |
| L8170 | ~~gradient compression stocking, full-length, chap style each~~ | BR |
| L8180 | ~~gradient compression stocking,~~ | BR |
| L8190 | ~~gradient compression stocking, waist length each~~ | BR |
| L8200 | ~~gradient compression stocking, waist length, each~~ | BR |
| L8210 | ~~gradient compression stocking, custom-made~~ | BR |
| L8220 | ~~gradient compression, elastic stocking, lymphedema~~ | BR |
| L8300 | ~~truss, single with standard pad~~ | $58.56 |
| L8310 | ~~truss, double with standard pads~~ | $92.46 |
| L8320 | ~~truss, addition to standard pad, water pad~~ | $37.11 |
| L8330 | ~~truss, addition to standard pad, scrotal pad~~ | $34.27 |
| L8400 | ~~prosthetic sheath, below knee, each~~ | $23.02 |

| Code | ~~Abbreviated~~ Orthotic and Prosthetic ~~procedures (L-Codes)~~Maximum Allowable Payments<br>A complete listing of procedures and codes ~~is~~are found in HCPCS ~~as adopted by reference in R 418.10107~~. | Map |
|---|---|---|
| L8410 | ~~prosthetic sheath, above knee, each~~ | $19.18 |
| L8415 | ~~prosthetic sheath, upper limb, each~~ | $19.84 |
| L8420 | ~~prosthetic sock, multiple ply, below knee, each~~ | $18.01 |
| L8430 | ~~prosthetic sock, multiple ply, above knee, each~~ | $20.50 |
| L8435 | ~~prosthetic sock, multiple ply, upper limb, each~~ | $19.46 |
| L8440 | ~~prosthetic shrinker, below knee, each~~ | $38.71 |
| L8460 | ~~prosthetic shrinker, above knee, each~~ | $61.69 |
| L8465 | ~~prosthetic shrinker, upper limb, each~~ | $45.16 |
| L8470 | ~~stump sock, single ply, fitting, below knee, each~~ | $6.18 |
| L8480 | ~~stump sock, single ply, fitting, above knee, each~~ | $8.52 |
| L8485 | ~~stump sock, single ply, fitting, upper limb, each~~ | $10.17 |
| ~~L8490~~ | ~~addition to prosthetic sheath/sock, air seal suction retent.~~ | ~~$134.87~~ |
| L8499 | ~~unlisted procedure for miscellaneous prosthetic services~~ | BR |
| L8500 | ~~artificial larynx, any type~~ | BR |
| L8501 | ~~tracheostomy speaking valve~~ | BR |
| L8610 | ~~ocular~~ | BR |
| L8699 | ~~prosthetic implant, not otherwise specified~~ | BR |

## NOTICE OF PUBLIC HEARING

DEPARTMENT OF LABOR & ECONOMIC GROWTH
WORKERS' COMPENSATION AGENCY
HEALTH CARE SERVICES DIVISION
Rule Set 2005-060 LG
NOTICE OF PUBLIC HEARING
November 14, 2005
General Office Building
Conference Room B, First Floor – 11:00 a.m. to 3:00 p.m.
7150 Harris Drive
Lansing MI 48913-0001

The Health Care Services division of the Workers' Compensation Agency will hold a public hearing on Monday, November 14, 2005, at the General Office Building, 7150 Harris Drive, Lansing, Michigan in Conference Room B on the First Floor from 11:00 a.m. until 3:00 p.m. The hearing will be held to receive public comments on the proposed rules for the Health Care Services Division.

These rules are promulgated by authority conferred on the Workers' Compensation Agency by sections 205 and 315 of 1969 PA 317, section 33 of 1969 PA 306, Executive Reorganization Order Nos. 1982-2, 1986-3, 1990-1, 1996-2, and 2003-1, MCL 418.205, 418.315, 24.233, 18.24, 418.1, 418.2, 445.2001, and 445.2011 and will take effect 7 days after filing with the Secretary of State.

The rules [Rule Set 2005-060 LG] are published on the Michigan Government web site at http://www.michigan.gov/orr and in the October 15, 2005 issue of the *Michigan Register*. Individuals may present oral comments not to exceed five minutes and shall provide a written copy to the court reporter upon testimony. Written comments may be submitted to the following address by 5:00 p.m. on November 14, 2005. Copies of the draft rules may also be obtained by mail or electronic transmission at the following address:

Workers' Compensation Agency
Health Care Services Division
7150 Harris Drive
Lansing MI 48913-0001

Phone: Michelle Mapes at (517) 322-5433, FAX (517) 322-6689, E-mail: mmapes@michigan.gov

The hearing site is accessible, including handicapped parking. Individuals attending the meeting are requested to refrain from using heavily scented personal care products, in order to enhance accessibility for everyone. Individuals needing TTY access are to call (517) 322-5987. People with disabilities requiring additional accommodations such as information in alternative formats in order to participate in the hearing should contact Michelle Mapes at least 14 days before the hearing.

## PROPOSED ADMINISTRATIVE RULES

SOARH 2005-080

DEPARTMENT OF LABOR AND ECONOMIC GROWTH

WORKERS' COMPENSATION AGENCY

GENERAL RULES

Filed with the Secretary of State on

These rules become effective immediately upon filing with the Secretary of State unless adopted under sections 33, 44, or 45a(6) of 1969 PA 306. Rules adopted under these sections become effective 7 days after filing with the Secretary of State.

(By authority conferred on the director of the workers' compensation agency by section 205 of 1969 PA 317, section 48 of 1969 PA 306, and Executive Reorganization Order Nos. 1996-2, 1999-3, 2002-1, and 2003-1, MCL 418.205, 24.248, 445.2001, 418.3, 445.2004, and 445.2011)

Rule 408.43t of the Administrative Code is added as follows:

R408.43t Group self-insurance; employee leasing

Rule 43t. On or after the effective date of this rule, an employee leasing company approved for membership in a group self-insurance fund pursuant to MCL 418.611(2) of the workers' compensation act shall qualify as being in the same industry of the group fund if the employee leasing company meets all of the following conditions:

a) The individual or individuals or entity or entities owning the entity or entities where the employees are or will be placed shall have a combined majority ownership interest of at least 51% in the prospective member leasing company.

b) The leasing company shall only lease employees to entities that qualify for and participate in the group to which the leasing company seeks admission.

c) The application submitted for membership by the employee leasing company shall clearly state on the first page of the application that the entity is an employee leasing company and shall name all the owners of the leasing company and the percentage of ownership of each owner. Any change in the percentage of ownership shall be reported to the group fund and the agency within 10 days of the ownership change. If the leasing company no longer meets the requirements of subdivision (a) or (b) of this rule after the change in ownership, then the leasing company shall be subject to termination pursuant to R 408.43g(4).

d) The application shall identify and name the entity or entities with which employees are placed or to be placed, the name of each individual or entity that owns the entity with which employees are or will be placed, and the percentage or ownership interest for each.

e) If the leasing company leases employees to any entity which is not a member of the group fund of which the leasing company is a member, or the leasing company fails to report any changes in ownership to the group fund and the agency within 10 days of the change in ownership, then the leasing company shall be terminated from participation in the group fund, pursuant to R 408.43g(4).

9/21/05

## NOTICE OF PUBLIC HEARING

DEPARTMENT OF LABOR & ECONOMIC GROWTH
WORKERS' COMPENSATION AGENCY
GROUP SELF-INSURANCE; EMPLOYEE LEASING
Rule Set 2005-080LG
NOTICE OF PUBLIC HEARING
November 14, 2005
Conference Room B
Department of Labor & Economic Growth
State Secondary Complex, General Office Building
7150 Harris Drive; Lansing, Michigan
Conference Room B, First Floor – 9:00 a.m.

The Department of Labor & Economic Growth, Workers' Compensation Agency will hold a public hearing on Monday, November 14, 2005, at the Department of Labor & Economic Growth, State Secondary Complex, General Office Building, 7150 Harris Drive, Lansing, Michigan in Conference Room B on the first floor at 9:00 a.m. The hearing will be held to receive public comment on the proposed rule for Group Self-Insurance; Employee Leasing.

The proposed rule is new, drafted to set criteria for employee leasing companies applying for membership in group self-insurance funds.

These rules are promulgated by authority conferred on the Director of the Workers' Compensation Agency by section 205 of 1969 PA 317, section 48 of 1969 PA 306, and ERO Nos. 1996-2, 1999-3, 2002-1, and 2003-1, MCL 418.205, 24.248, 445.2001, 418.3, 445.2004 and 445.2011. This rule will become effective immediately upon filing with the Secretary of State unless adopted under sections 33, 44 or 45a (6) of 1969 PA 306. Rules adopted under these sections become effective 7 days after filing with the Secretary of State.

This rule [Rule Set 2005-080 LG] is published on the Michigan Government web site at http://www.michigan.gov/orr and in the November 1, 2005 issue of the *Michigan Register*. Comments may be submitted to the following address by 5:00 p.m. on November 14, 2005. Copies of the draft rule may also be obtained by mail or electronic transmission at the following address:

Department of Labor & Economic Growth
Workers' Compensation Agency
Self-Insured Programs Division
State Secondary Complex, 1st Floor, Wing B
7150 Harris Drive
Lansing, Michigan 48913

Phone: (517) 322-1868, FAX (517) 322-5944, Email: jschro@michigan.gov

The hearing site is accessible, including handicapped parking. Individuals attending the meeting are requested to refrain from using heavily scented personal care products, in order to enhance accessibility

for everyone. People with disabilities requiring additional accommodations such as information in alternative formats in order to participate in the hearing should contact Susan Bickel at (517) 322-1106 (voice) or (517) 322-5987 (TTY) at least 14 working days before the hearing.

## PROPOSED ADMINISTRATIVE RULES

SOAHR 2005-082

DEPARTMENT OF LABOR AND ECONOMIC GROWTH

DIRECTOR'S OFFICE

CONSTRUCTION SAFETY STANDARDS

Filed with the Secretary of State on

These rules take effect 14 days after filing with the Secretary of State

**(By authority conferred on the director of the department of labor and economic growth by sections 19 and 21 of 1974 PA 154, and Executive Reorganization Order Nos. 1996-2 and 2003-18, MCL 408.1019, 408.1021, 445.2001, and 445.2011)**

R 408.42602, R 408.42605, R 408.42608, R 408.42609, R 408.42616, R 408.42628, R 408.42629, R 408.42634, R 408.42636, R 408.42640, R 408.42648, R 408.42651, and R 408.42655 of the Michigan Administrative Code are amended, and R 408.42624 and R 408.42625 are rescinded from the Code as follows:

### PART 26. STEEL ERECTION

R 408.42602 Reference of standards.

Rule 2602. (1) The following occupational safety and health administrative standards and appendices are referenced in this standard. **Up to 5 copies of these standards may be obtained at no charge from the Michigan Department of Labor and Economic Growth, MIOSHA Standards Section** ~~and are available at the offices of the Michigan Department of Consumer and Industry Services, MIOSHA Standards Division,~~ 7150 Harris Drive, **P.O.** Box 30643, Lansing, Michigan 48909-8143, or via the internet at: ~~web-site www.cis.state.mi.us/bsr/divisions/std, at no cost as of the time of adoption of these rules:~~ **www.michigan.gov/mioshastandards. For quantities greater than 5, the cost, at the time of adoption of these rules, is 4 cents per page.**

(a) Construction Safety Standard Part 10. "Lifting and Digging Equipment," being R 408.41001a et seq. of the Michigan administrative code.

(b) Construction Safety Standard Part 45. "Fall Protection," being R 408.44501 et seq. of the Michigan administrative code.

R 408.42605 Definitions; D to M.

Rule 2605. (1) "Decking hole" means a gap or void more than 2 inches (5.1 cm) in its least dimension and less than 12 inches (30.5 cm) in its greatest dimension in a floor, roof, or other walking/working surface. Pre-engineered holes in cellular decking for wires, cables, and the like are not included in this definition.

(2) "Derrick floor" means an elevated floor of a building or structure that has been designated to receive hoisted pieces of steel before final placement.

(3) "Double connection" means an attachment method where the connection point is intended for 2 pieces of steel that share common bolts on either side of a central piece.

(4) "Double connection seat" means a structural attachment that, during the installation of a double connection, supports the first member while the second member is connected.

(5) "Erection bridging" means the bolted diagonal bridging that is required to be installed before releasing the hoisting cables from the steel joists.

(6) "Fall restraint system" means a fall protection system that prevents the user from falling any distance. The system is comprised of either a body belt or body harness, together with an anchorage, connectors, and other necessary equipment. The other components typically include a lanyard, and may also include a lifeline and other devices.

(7) "Final interior perimeter" means the perimeter of a large permanent open space within a building such as an atrium or courtyard. This does not include openings for stairways, elevator shafts, and the like.

(8) "Girt, in systems-engineered metal buildings" means a "Z" or "C" shaped member formed from sheet steel spanning between primary framing and supporting wall material.

(9) "Headache ball" means a ~~weighted hook that is used to attach loads to the hoist load line of the crane.~~ **solid iron weight, usually spherical, used to keep the loadline taut and positioned above the hook.**

(10) "Hoisting equipment" means commercially manufactured lifting equipment designed to lift and position a load of known weight to a location at some known elevation and horizontal distance from the equipment's center of rotation. "Hoisting equipment" includes, but is not limited to all of the following:

(a) Cranes.

(b) Derricks.

(c) Tower cranes.

(d) Barge-mounted derricks or cranes.

(e) Gin poles.

(f) Gantry hoist systems.

A "come-a-long," that is, a mechanical device, usually consisting of a chain or cable attached at each end, that is used to facilitate movement of materials through leverage is not considered "hoisting equipment."

(11) "Leading edge" means the unprotected side and edge of a floor, roof, or formwork for a floor or other walking/working surface, such as a deck, which changes location as additional floor, roof, decking, or formwork sections are placed, formed, or constructed.

(12) **"Load line standing platform" means an attachment to the headache ball of a crane that provides adequate footing for the safe transport of connectors.**

~~(12)~~ **(13)** "Metal decking" means a commercially manufactured, structural grade, cold-rolled metal panel formed into a series of parallel ribs. As used in this part, the term includes metal floor and roof decks, standing seam metal roofs, other metal roof systems, and other products, such as bar gratings, checker plate, expanded metal panels, and similar products. After installation and proper fastening, these decking materials serve a combination of functions, including, but not limited to any of the following:

(a) A structural element designed in combination with the structure to resist, distribute, and transfer loads, stiffen the structure, and provide a diaphragm action.

(b) A walking/working surface.

(c) A form for concrete slabs.

(d) A support for roofing systems.

(e) A finished floor or roof.

~~(13)~~ **(14)** "Multiple lift rigging" means a rigging assembly manufactured by wire rope rigging suppliers that facilitates the attachment of up to 5 independent loads to the hoist rigging of a crane.

R 408.42608 Site layout, erection plan**,** and construction sequence.

Rule 2608. (1) Before authorizing the commencement of steel erection, the controlling contractor shall ensure that the steel erector is provided with the following written notifications:

(a) The concrete in the footings, piers, and walls and the mortar in the masonry piers and walls has attained, on the basis of an appropriate ASTM standard test method of field-cured samples, either 75% of the intended minimum compressive design strength or sufficient strength to support the loads imposed during steel erection.

(b) Any repairs, replacements, and modifications to the anchor bolts were conducted in accordance with R 408.42626**(5) and** (6).

(2) A steel erection contractor shall not erect steel unless it has received written notification that the concrete in the footings, piers, and walls or the mortar in the masonry piers and walls has attained, on the basis of an appropriate ASTM standard test method of field-cured samples, either 75% of the intended minimum compressive design strength or sufficient strength to support the loads imposed during steel erection.

(3) The controlling contractor shall ensure that both of the following are provided and maintained:

(a) Adequate access roads into and through the site for the safe delivery and movement of derricks, cranes, trucks, other necessary equipment, and the material to be erected and means and methods for pedestrian and vehicular control. However, this requirement does not apply to roads outside of the construction site.

(b) A firm, properly graded, drained area which is readily accessible to the work and which has adequate space for the safe storage of materials and the safe operation of the erector's equipment.

(4) All hoisting operations in steel erection shall be preplanned to ensure that the requirements of R 408.42609(4) and (5) are met.

(5) If an employer elects, due to conditions specific to the site, to develop alternate means and methods that provide employee protection in accordance with R 408.42609(3), R 408.42634(4), or R 408.42638(4), then a site-specific erection plan shall be developed by a qualified person and be available at the work site. Guidelines for establishing a site-specific erection plan are contained in appendix A~~, as referenced in R 408.42602(1)~~.

R 408.42609 Hoisting and rigging.

Rule 2609. (1) All the provisions of construction safety standard Part 10. "Lifting and Digging Equipment," being R 408.41001a et seq., which ~~are~~ **is** referenced in R 408.42602, apply to hoisting and rigging.

(2) Where the work area is inaccessible or hazardous to reach by other means, a maximum of 2 connectors may ride the headache ball to and from the workstation with the knowledge and consent of the employer or the employer's designated representative. ~~When a connector or connectors are allowed to ride the headache ball, a load shall not be attached to the load line.~~ **The connector or connectors may be lifted to the workstation only when all of the following conditions exist:**

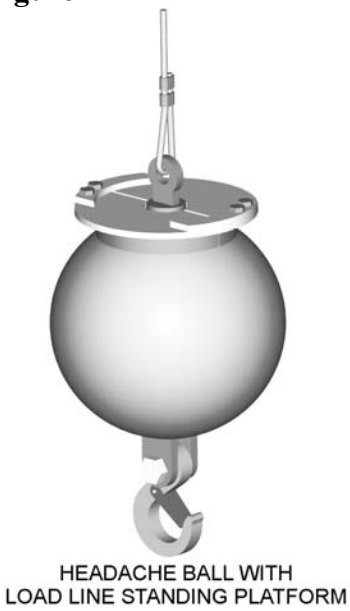
**(a) Connectors riding a load line standing platform shall be protected from falling by a positioning device system or a personal fall arrest system as prescribed in construction safety standard Part 45. "Fall Protection," R 408.44501 et seq. which is referenced in R 408.42602.**

**(b) The connector or connectors and his or her immediate supervisor, who shall be a competent person, and the operator who will perform the lift shall verbally agree and certify in writing that using the load line standing platform is the safest alternative. They shall plan the lift together to**

**minimize the transport distance. A minimum distance of 20 feet shall be maintained between the load line standing platform and the top sheave.**

**(c) A load line standing platform shall be a minimum of 3/8 of an inch thick steel plate not less than 12 inches nor more than 18 inches in diameter and shall provide means for slip resistant footing. The platform shall be secured in such a manner to prevent tipping and shall be placed between the headache ball and the wedge socket. (See figure 1.) As an alternative, a shackle rated not less than 25 tons may be used. (See figure 2.)**

**Figure 1**



HEADACHE BALL WITH
LOAD LINE STANDING PLATFORM

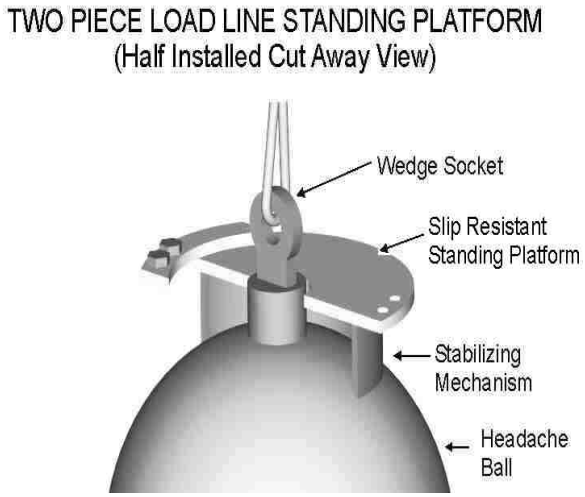
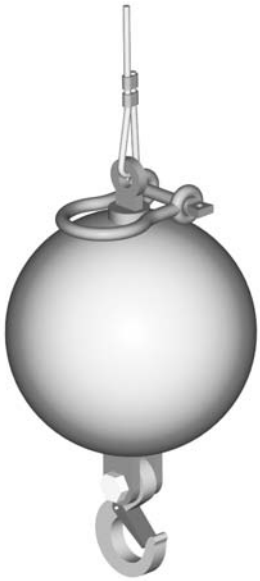



**Figure 2**



HEADACHE BALL WITH SHACKLE

**(d) No rigging or load shall be attached to the crane or derrick during the use of a load line standing platform by the connector or connectors.**

**(e) The maximum rate of travel for the connector or connectors riding the load line standing platform shall be 100 feet per minute. Free-spooling and live booms are prohibited. Controlled load lowering shall be used when the load line standing platform is used to lower the connector or connectors.**

**(f) There shall be a communication system between the connector or connectors on a load line standing platform and the operator of the crane or derrick. The system may be hand signals or a closed 2-way selective frequency radio system. Hand signals shall be followed according to appendix I of this part.**

**(g) An operator of a crane or derrick shall:**

**(i) Not be authorized to raise or lower the connector or connectors on a load line standing platform unless the operator is certified by the national commission for the certification of crane operators or an equivalent crane certification organization.**

**(ii) Be trained in all of the provisions of R 408.42609(2) before being allowed to transport the connector or connectors on a load line standing platform.**

**(h) When a load line standing platform is in use by the connector or connectors, the operator of a crane or derrick shall maintain the minimum distance from an energized power transmission or distribution line as required in table 1, as follows:**

**Table 1**

| VOLTAGE | MINUMUM CLEARANCE |
|---|---|
| Up to 50 kV | 20 feet |
| Over 50 kV | 20 feet + 0.8 inch per kV over 50 kV |

**(i) The load line of a crane or derrick that is used to raise or lower the connector or connectors on a load line standing platform shall have a safety factor of 10 for the anticipated load, and be equipped with a swivel to prevent any rotation of the load line standing platform. A minimum of ½ inch diameter load line shall be used.**

**(j) Neither the load line standing platform nor the boom shall be lowered below the point where less than 3 full wraps of the wire rope remain on their respective drums.**

**(k) A crane or derrick that is used to raise or lower a load line standing platform shall be set level according to the crane or derrick manufacturer's specifications. The travel lock shall be engaged on a crane when the load line standing platform is in use.**

**(l) A crane that is equipped with outriggers shall have the beams and jacks fully extended to provide maximum stability and the floats shall have a stable bearing when the load line standing platform is in use by the connector or connectors. A crawler crane shall have its crawlers fully extended when the load line standing platform is in use.**

**(m) Where a crane or derrick will be used to elevate the connector or connectors on the load line standing platform to an area where there has been no previous lift of structural members, a trial lift shall be performed and consist of positioning the load line standing platform to the position it is to be used with an assumed minimum anticipated load of 1,000 pounds. The operator shall determine that all configurations necessary to reach the work location will allow the crane or derrick to remain under the 50% limit of the hoisting capacity; that all systems, controls, and safety devices are activated and functioning properly; and that interferences do not exist. This will be done at each set-up location of a crane or derrick prior to elevating the connector or connectors.**

(3) Safety latches on hooks shall not be deactivated or made inoperable, except in either of the following situations:

(a) When a qualified rigger has determined that the hoisting and placing of purlins and single joists can be performed more safely by doing so.

(b) When equivalent protection is provided in a site-specific erection plan.

(4) Routes for suspended loads shall be preplanned to ensure that no employee is required to work directly below a suspended load, except for the following employees:

(a) Employees engaged in the initial connection of the steel.

(b) Employees necessary for the hooking or unhooking of the load.

(5) When working under suspended loads, all of the following criteria shall be met:

(a) Materials being hoisted shall be rigged to prevent unintentional displacement.

(b) Hooks with self-closing safety latches or their equivalent shall be used to prevent components from slipping out of the hook.
(c) All loads shall be rigged by a qualified rigger.

R 408.42616 Walking and working surfaces.
Rule 2616. (1) Shear connectors, such as headed steel studs, steel bars, or steel lugs, reinforcing bars, deformed anchors, or threaded studs shall not be attached to the top flanges of beams, joists, or beam attachments so that they project vertically from or horizontally across the top flange of the member until after the metal decking or other walking/working surface has been installed.
(2) If shear connectors are used in the construction of composite floors, roofs, and bridge decks, then employees shall lay out and install the shear connectors after the metal decking has been installed, using the metal decking as a working platform. Shear connectors shall not be installed from within a controlled decking zone (CDZ), as specified in R 408.42648(1)(g).
(3) Slip resistance of skeletal structural steel. Workers shall not be permitted to walk the top surface of any structural steel member installed after July 18, 2006, that has been coated with paint or similar material, unless documentation or certification that the coating has achieved a minimum average slip resistance of .50 when measured with an English XL tribometer or equivalent tester on a wetted surface at a testing laboratory is provided. Such documentation or certification shall be based on the appropriate ASTM standard test method conducted by a laboratory capable of performing the test. The results shall be available at the site and to the steel erector. ~~(~~Appendix B~~, as referenced in R 408.42602[1],~~ references appropriate ASTM standard test methods that may be used to comply with this subrule.~~)~~

R 408.42624 **Rescinded.** ~~Bolting and riveting.~~
~~Rule 2624. (1) A container shall be provided for storing and carrying fasteners, such as bolts and rivets and drift pins. The container shall be secured against inadvertent displacement when there is a possibility of the container falling.~~
~~(2) A pneumatic tool used for riveting or bolting shall have the pressure relieved and shall be disconnected from the hose line before adjustment or repairs are made to the tool.~~
~~(3) An impact wrench shall be equipped with a device to retain the socket.~~
~~(4) Air line hose sections shall be tied together except when quick disconnect couplers are used to join sections.~~
~~(5) When a bolt, drift pin, or rivet is knocked out, a means shall be provided to prevent it from falling.~~
~~(6) Riveting shall not be done in the vicinity of combustible material unless precautions are taken to prevent fire.~~
~~(7) When rivet heads are cut off or backed off, a means shall be provided to prevent them from falling.~~

R 408.42625 **Rescinded.** ~~Plumbing up.~~
~~Rule 2625. (1) Turnbuckles and other apparatus used in plumbing up shall be accessible to the employees for adjustment and dismantling. Connections of the equipment used in plumbing up shall be secured. The turnbuckles shall be secured to prevent unwinding while under stress.~~
~~(2) Plumbing up guy wires shall be removed under the supervision of a competent person.~~

R 408.42628 Beams and columns; diagonal bracing; column splices; perimeter columns.
Rule 2628. (1) During the final placing of solid web structural members, the load shall not be released from the hoisting line until the members are secured with not less than 2 bolts per connection, of the same size and strength as shown in the erection drawings, drawn up wrench-tight or the equivalent as specified by the project structural engineer of record, except as specified in subrule (3) of this rule.

(2) A competent person shall determine if more than 2 bolts are necessary to ensure the stability of cantilevered members; if additional bolts are needed, they shall be installed.

(3) Solid web structural members used as diagonal bracing shall be secured by at least 1 bolt per connection drawn up wrench-tight or the equivalent as specified by the project structural engineer of record.

(4) Each column splice shall be designed to resist a minimum eccentric gravity load of 300 pounds (136.2 kg) located 18 inches (.46 m) from the extreme outer face of the column in each direction at the top of the column shaft.

(5) Perimeter columns shall not be erected unless both of the following provisions are satisfied:

(a) The perimeter columns extend a minimum of 48 inches (1.2 m) above the finished floor to permit installation of perimeter safety cables before erection of the next tier, except where constructibility does not allow. (See appendix F.~~, as referenced in R 408.42602[1]~~)

(b) The perimeter columns have holes or other devices in or attached to perimeter columns at 42 to 45 inches (107-114 cm) above the finished floor and the midpoint between the finished floor and the top cable to permit installation of perimeter safety cables required by R 408.42645(2), except where constructibility does not allow. (See appendix F.~~, as referenced in R 408.42602[1]~~)

R 408.42629 Double connections.

Rule 2629. (1) If 2 structural members on opposite sides of a column web, or a beam web over a column, are connected sharing common connection holes, then at least 1 bolt with its wrench-tight nut shall remain connected to the first member unless a shop-attached or field-attached seat or equivalent connection device is supplied with the member to secure the first member and prevent the column from being displaced (see appendix H~~, as referenced in R 408.42602[1],~~ for examples of equivalent connection devices).

(2) If a seat or equivalent device is used, then the seat (or device) shall be designed to support the load during the double connection process. The seat or equivalent device shall be adequately bolted or welded to both a supporting member and the first member before the nuts on the shared bolts are removed to make the double connection.

R 408.42634 Open web joists; field-bolted joists.

Rule 2634. (1) Except as provided in subrule (2) of this rule, where steel joists are used and columns are not framed in at least 2 directions with solid web structural steel members, a steel joist shall be field-bolted at the column to provide lateral stability to the column during erection. For the installation of this joist all of the following provisions apply:

(a) A vertical stabilizer plate shall be provided on each column for steel joists. The plate shall be a minimum of 6 inches by 6 inches (152 mm by 152 mm) and shall extend not less than 3 inches (76 mm) below the bottom chord of the joist with a 13/16-inch (21 mm) hole to provide an attachment point for guying or plumbing cables.

(b) The bottom chords of steel joists at columns shall be stabilized to prevent rotation during erection.

(c) Hoisting cables shall not be released until the seat at each end of the steel joist is field-bolted, and each end of the bottom chord is restrained by the column stabilizer plate.

(2) If constructibility does not allow a steel joist to be installed at the column, then both of the following provisions apply:

(a) An alternate means of stabilizing joists shall be installed on both sides near the column and the alternate means shall satisfy all of the following provisions:

(i) Provide stability equivalent to subrule (1) of this rule.

(ii) Be designed by a qualified person.

(iii) Be shop-installed.

(iv) Be included in the erection drawings.

(b) Hoisting cables shall not be released until the seat at each end of the steel joist is field-bolted and the joist is stabilized.

(3) If steel joists at or near columns span 60 feet (18.3 m) or less, then the joist shall be designed with sufficient strength to allow 1 employee to release the hoisting cable without the need for erection bridging.

(4) If steel joists at or near columns span more than 60 feet (18.3 m), then the joists shall be set in tandem with all bridging installed, unless an alternative method of erection, which provides equivalent stability to the steel joist, is designed by a qualified person and is included in the site-specific erection plan.

(5) A steel joist or steel joist girder shall not be placed on any support structure unless the structure is stabilized.

(6) If steel joists are landed on a structure, then they shall be secured to prevent unintentional displacement before installation.

(7) A modification that affects the strength of a steel joist or steel joist girder shall not be made without the approval of the project structural engineer of record.

(8) Both of the following provisions apply to field-bolted joists:

(a) Except for steel joists that have been preassembled into panels, connections of individual steel joists to steel structures in bays of 40 feet (12.2 m) or more shall be fabricated to allow for field-bolting during erection.

(b) The connections specified in subdivision (a) of this subrule shall be field-bolted unless constructibility does not allow.

(9) Steel joists and steel joist girders shall not be used as anchorage points for a fall arrest system unless written approval to do so is obtained from a qualified person.

(10) A bridging terminus point shall be established before bridging is installed. (See appendix C.~~, as referenced in R 408.42602[1]~~)

R 408.42636 Steel joists**;** attachment**;** ~~and~~ erection.

Rule 2636. (1) Each end of "K" series steel joists shall be attached to the support structure with a minimum of 2 1/8-inch (3 mm) fillet welds 1 inch (25 mm) long or with 2 1/2-inch (13 mm) bolts, or the equivalent.

(2) Each end of "LH" and "DLH" series steel joists and steel joist girders shall be attached to the support structure with a minimum of 2 1/4-inch (6 mm) fillet welds 2 inches (51 mm) long, or with 2 3/4-inch (19 mm) bolts, or the equivalent.

(3) Except as provided in subrule (4) of this rule, each steel joist shall be attached to the support structure, at least at 1 end on both sides of the seat, immediately upon placement in the final erection position and before additional joists are placed.

(4) Panels that have been preassembled from steel joists with bridging shall be attached to the structure at each corner before the hoisting cables are released.

(5) Both sides of the seat of 1 end of each steel joist that requires bridging under tables A and B shall be attached to the support structure before hoisting cables are released.

(6) For joists that are more than 60 feet long, both ends of the joist shall be attached as specified in this rule before the hoisting cables are released.

(7) On steel joists that do not require erection bridging under tables A and B, only 1 employee shall be allowed on the joist until all bridging is installed and anchored. Tables A and B read as follows:

Table A–Erection Bridging for Short Span Joists

| Joist | Span | | Joist | Span | | Joist | Span |
|---|---|---|---|---|---|---|---|
| 8L1 | NM | | 22K10 | 40-0 | | 14KCS1 | NM |
| 10K1 | NM | | 22K11 | 40-0 | | 14KCS2 | NM |
| 12K1 | 23-0 | | 24K4 | 36-0 | | 14KCS3 | NM |
| 12K3 | NM | | 24K5 | 38-0 | | 16KCS2 | NM |
| 12K5 | NM | | 24K6 | 39-0 | | 16KCS3 | NM |
| 14K1 | 27-0 | | 24K7 | 43-0 | | 16KCS4 | NM |
| 14K3 | NM | | 24K8 | 43-0 | | 16KCS5 | NM |
| 14K4 | NM | | 24K9 | 44-0 | | 18KCS2 | 35-0 |
| 14K6 | NM | | 24K10 | NM | | 18KCS3 | NM |
| 16K2 | 29-0 | | 24K12 | NM | | 18KCS4 | NM |
| 16K3 | 30-0 | | 26K5 | 38-0 | | 18KCS5 | NM |
| 16K4 | 32-0 | | 26K6 | 39-0 | | 20KCS2 | 36-0 |
| 16K5 | 32-0 | | 26K7 | 43-0 | | 20KCS3 | 39-0 |
| 16K6 | NM | | 26K8 | 44-0 | | 20KCS4 | NM |
| 16K7 | NM | | 26K9 | 45-0 | | 20KCS5 | NM |
| 16K9 | NM | | 26K10 | 49-0 | | 22KCS2 | 36-0 |
| 18K3 | 31-0 | | 26K12 | NM | | 22KCS3 | 40-0 |
| 18K4 | 32-0 | | 28K6 | 40-0 | | 22KCS4 | NM |
| 18K5 | 33-0 | | 28K7 | 43-0 | | 22KCS5 | NM |
| 18K6 | 35-0 | | 28K8 | 44-0 | | 24KCS2 | 39-0 |
| 18K7 | NM | | 28K9 | 45-0 | | 24KCS3 | 44-0 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 18K9 | NM | | 28K10 | 49-0 | | 24KCS4 | NM |
| 18K10 | NM | | 28K12 | 53-0 | | 24KCS5 | NM |
| 20K3 | 32-0 | | 30K7 | 44-0 | | 26KCS2 | 39-0 |
| 20K4 | 34-0 | | 30K8 | 45-0 | | 26KCS3 | 44-0 |
| 20K5 | 34-0 | | 30K9 | 45-0 | | 26KCS4 | NM |
| 20K6 | 36-0 | | 30K10 | 50-0 | | 26KCS5 | NM |
| 20K7 | 39-0 | | 30K11 | 52-0 | | 28KCS2 | 40-0 |
| 20K9 | 39-0 | | 30K12 | 54-0 | | 28KCS3 | 45-0 |
| 20K10 | NM | | 10KCS1 | NM | | 28KCS4 | 53-0 |
| 22K4 | 34-0 | | 10KCS2 | NM | | 28KCS5 | 53-0 |
| 22K5 | 35-0 | | 10KCS3 | NM | | 30KCS3 | 45-0 |
| 22K6 | 36-0 | | 12KCS1 | NM | | 30KCS4 | 54-0 |
| 22K7 | 40-0 | | 12KCS2 | NM | | 30KCS5 | 54-0 |
| 22K9 | 40-0 | | 12KCS3 | NM | | | |

NM = ~~diagonal bolted bridging~~ not mandatory ~~for joists under 40 feet~~.

Table B–Erection Bridging for Long Span Joists

| Joist | Span | | Joist | Span |
|---|---|---|---|---|
| 18LH02 | 33-0 | | 28LH06 | 42-0 |
| 18LH03 | NM | | 28LH07 | NM |
| 18LH04 | NM | | 28LH08 | NM |
| 18LH05 | NM | | 28LH09 | NM |
| 18LH06 | NM | | 28LH10 | NM |
| 18LH07 | NM | | 28LH11 | NM |

| | | | | |
|---|---|---|---|---|
| 18LH08 | NM | | 28LH12 | NM |
| 18LH09 | NM | | 28LH13 | NM |
| 20LH02 | 33-0 | | 32LH06 | 47-0 through 60-0 |
| 20LH03 | 38-0 | | 32LH07 | 47-0 through 60-0 |
| 20LH04 | NM | | 32LH08 | 55-0 through 60-0 |
| 20LH05 | NM | | 32LH09 | NM through 60-0 |
| 20LH06 | NM | | 32LH10 | NM through 60-0 |
| 20LH07 | NM | | 32LH11 | NM through 60-0 |
| 20LH08 | NM | | 32LH12 | NM through 60-0 |
| 20LH09 | NM | | 32LH13 | NM through 60-0 |
| 20LH10 | NM | | 32LH14 | NM through 60-0 |
| 24LH03 | 35-0 | | 32LH15 | NM through 60-0 |
| 24LH04 | 39-0 | | 36LH07 | 47-0 through 60-0 |
| 24LH05 | 40-0 | | 36LH08 | 47-0 through 60-0 |
| 24LH06 | 45-0 | | 36LH09 | 57-0 through 60-0 |
| 24LH07 | NM | | 36LH10 | NM through 60-0 |
| 24LH08 | NM | | 36LH11 | NM through 60-0 |
| 24LH09 | NM | | 36LH12 | NM through 60-0 |
| 24LH10 | NM | | 36LH13 | NM through 60-0 |
| 24LH11 | NM | | 36LH14 | NM through 60-0 |
| 28LH05 | 42-0 | | 36LH15 | NM through 60-0 |

NM = ~~diagonal bolted bridging~~ not mandatory ~~for joists under 40 feet~~.

(8) Employees shall not be allowed on steel joists where the span of the steel joist is equal to or greater than the span shown in tables A and B, except in accordance with subrules (10), (11), (12), (13), (14), and (15) of this rule.

(9) When permanent bridging terminus points cannot be used during erection, additional temporary bridging terminus points are required to provide stability. (See appendix C.~~, as referenced in R 408.42602[1]~~)

(10) If the span of the steel joist is equal to or greater than the span shown in tables A and B, then all of the following provisions shall apply:

(a) A row of bolted diagonal erection bridging shall be installed near the midspan of the steel joist.

(b) Hoisting cables shall not be released until the bolted diagonal erection bridging specified in subdivision (a) of this subrule is installed and anchored.

(c) Not more than 1 employee shall be allowed on spans of steel joist that is equal to or greater than the span shown in tables A and B, until all other bridging is installed and anchored.

(11) If the span of the steel joist is not less than 60 feet (18.3 m) and not more than 100 feet (30.5 m), then all of the following provisions shall apply:

(a) All rows of bridging shall be bolted diagonal bridging.

(b) Two rows of bolted diagonal erection bridging shall be installed near the third points of the steel joist.

(c) Hoisting cables shall not be released until bolted diagonal erection bridging is installed and anchored.

(d) Not more than 2 employees shall be allowed on spans of steel joist not less than 60 feet and not more than 100 feet until all other bridging is installed and anchored.

(12) If the span of the steel joist is not less than 100 feet (30.5 m) and not more than 144 feet (43.9 m), then all of the following provisions shall apply:

(a) All rows of bridging shall be bolted diagonal bridging.

(b) Hoisting cables shall not be released until all bridging is installed and anchored.

(c) Not more than 2 employees shall be allowed on spans of steel joist that are not less than 100 feet and not more than 144 feet until all bridging is installed and anchored.

(13) For steel members spanning more than 144 feet (43.9 m), the erection methods used shall be in accordance with R 408.42628 and R 408.42629.

(14) If any steel joist specified in subrules (6), (10), (11), and (12) of this rule is a bottom chord bearing joist, then a row of bolted diagonal bridging shall be provided near the supports. The bridging shall be installed and anchored before the hoisting cables are released.

(15) If bolted diagonal erection bridging is required by this rule, then all the following provisions shall apply:

(a) The bridging shall be indicated on the erection drawing.

(b) The erection drawing shall be the exclusive indicator of the proper placement of the bridging.

(c) Shop-installed bridging clips, or functional equivalents, shall be used where the bridging bolts to the steel joists.

(d) If 2 pieces of bridging are attached to the steel joist by a common bolt, then the nut that secures the first piece of bridging shall not be removed from the bolt for the attachment of the second.

(e) Bridging attachments shall not protrude above the top chord of the steel joist.

R 408.42640 Installation of metal decking.

Rule 2640. (1) Except as provided in R 408.42648(1), metal decking shall be laid tightly and immediately secured upon placement to prevent accidental movement or displacement.

(2) During initial placement, metal decking panels shall be placed to ensure full support by structural members.

(3) Derrick floors. A derrick floor shall be fully decked or planked and the steel member connections completed to support the intended floor loading.

(4) Temporary loads placed on a derrick floor shall be distributed over the underlying support members so as to prevent local overloading of the deck material.

(5) Temporary flooring shall comply with all of the following provisions:

(a) Consist of either wood planking which is not less than 2 inches thick, undressed, full size or metal decking or grating of equivalent strength.

(b) Cover the entire area, except for access openings.

(c) Be secured against displacement.

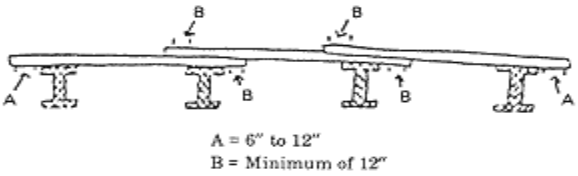
(d) Be capable of carrying the maximum intended working load.

(6) Planking of temporary floors shall comply with both of the following provisions:

(a) Extend beyond an end bearer not less than 6 inches nor more than 12 inches.

(b) Overlap any intermediate bearer by a minimum of 12 inches. (See figure ~~1~~ **3**.) Figure ~~1~~ **3** reads as follows:

Figure ~~1~~ **3**




(7) When gathering and stacking temporary floor planks, the planks shall be removed successively, working toward the last panel of the temporary floor so that the work is always done from the planked floor.

(8) When gathering and stacking temporary floor planks from the last panel, employees assigned to such work shall be protected as specified in R 408.42645.

R 408.42648 Controlled decking zone (CDZ).

Rule 2648. (1) A controlled decking zone may be established in that area of the structure of more than 15 and up to 30 feet above a lower level where metal decking is initially being installed and forms the leading edge of a work area. In each CDZ, all of the following provisions shall apply:

(a) Each employee working at the leading edge in a CDZ shall be protected from fall hazards of more than 2 stories or 30 feet (9.1 m), whichever is less.

(b) Access to a CDZ shall be limited to only those employees engaged in leading edge work.

(c) The boundaries of a CDZ shall be designated and clearly marked. The CDZ shall not be more than 90 feet (27.4 m) wide and 90 (27.4 m) feet deep from any leading edge. The CDZ shall be marked by the use of control lines or the equivalent. Examples of acceptable procedures for demarcating ~~CDZ's~~ **CDZs** can be found in appendix D~~, as referenced in R 408.42602[1]~~.

(d) Each employee working in a CDZ shall have completed CDZ training in accordance with R 408.42655(3).

(e) Unsecured decking in a CDZ shall not be more than 3,000 square feet (914.4 $m^2$).

(f) Safety deck attachments shall be performed in the CDZ from the leading edge back to the control line and shall have not less than 2 attachments for each metal decking panel.

(g) Final deck attachments and installation of shear connectors shall not be performed in the CDZ.

R 408.42651 Criteria for fall protection equipment; custody of fall protection.

Rule 2651. (1) Guardrail systems, safety net systems, personal fall arrest systems, positioning device systems and their components shall conform to the criteria in 29 C.F.R. §1926.502, which is adopted by reference in R 408.44502 of construction safety standard Part 45. "Fall Protection," which is referenced in R 408.42602. (See appendix G.~~, as referenced in R 408.42602[1]~~)

(2) Fall arrest system components shall be used in fall restraint systems and shall conform to the criteria in 29 C.F.R. §1926.502, which is adopted by reference in R 408.44502 of construction safety standard Part 45. "Fall Protection," which is referenced in R 408.42602. (See appendix G.~~, as referenced in R 408.42602[1]~~) Either body belts or body harnesses shall be used in fall restraint systems.

(3) Perimeter safety cables shall meet the criteria for guardrail systems in 29 C.F.R. §1926.502, which is adopted by reference in R 408.44502 of construction safety standard Part 45. "Fall Protection," which is referenced in R 408.42602. (See appendix G.~~, as referenced in R 408.42602[1]~~)

(4) Fall protection provided by the steel erector shall remain in the area where steel erection activity has been completed, to be used by other trades, only if the controlling contractor or its authorized representative has done both of the following:

(a) Directed the steel erector to leave the fall protection in place.

(b) Inspected and accepted control and responsibility of the fall protection before authorizing persons other than steel erectors to work in the area.

R 408.42655 Special training.

Rule 2655. (1) An employer shall ensure that each employee who performs multiple lift rigging has been provided training in both of the following areas:

(a) The nature of the hazards associated with multiple lifts.

(b) The proper procedures and equipment to perform multiple lifts required by R 408.42610.

(2) An employer shall ensure that each connector has been provided training in ~~both of~~ the following areas:

(a) The nature of the hazards associated with connecting.

(b) The establishment, access, proper connecting techniques, and work practices required by R 408.42629(1) and (2) and R 408.42646.

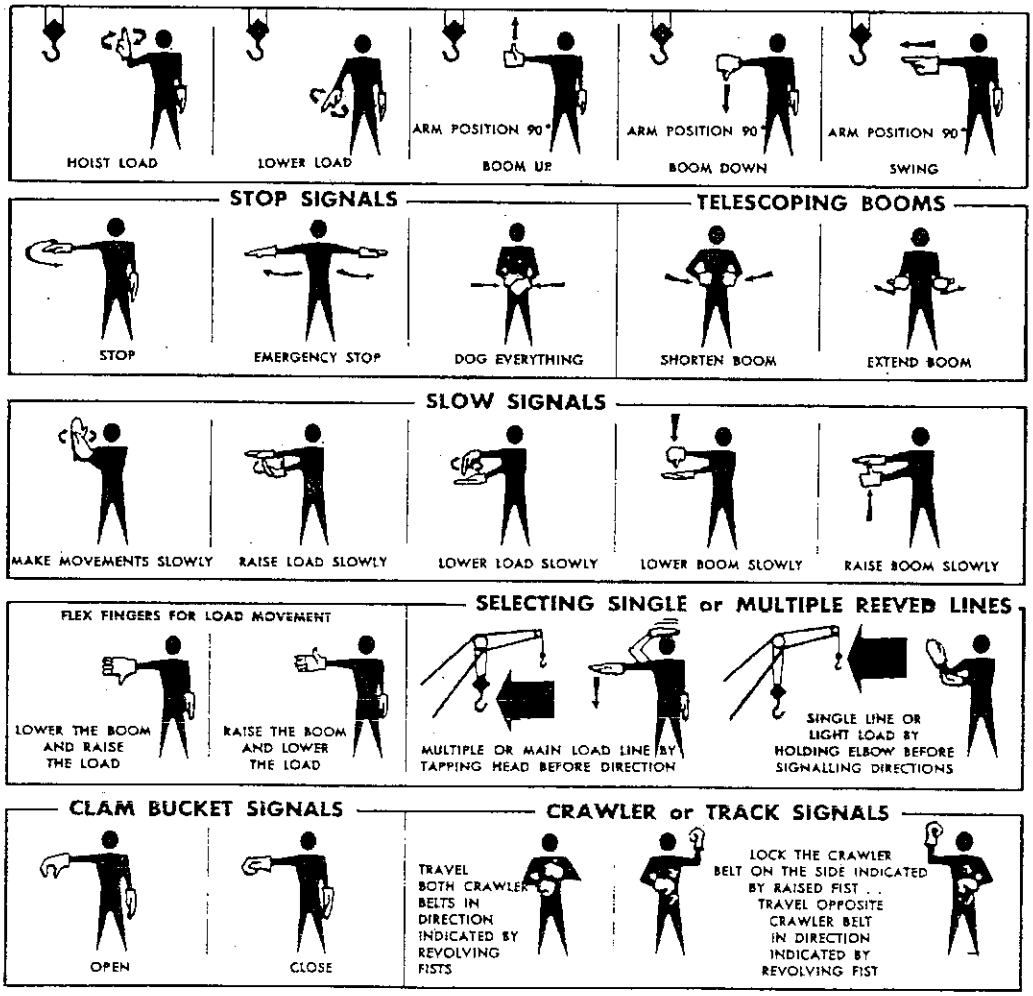
**(c) Specific training on riding the headache ball as prescribed in R 408.42609(2).**

(3) Where ~~CDZ's~~ **CDZs** are being used, an employer shall assure that each employee has been provided training in both of the following areas:

(a) The nature of the hazards associated with work within a controlled decking zone.

(b) The establishment, access, proper installation techniques, and work practices required by R 408.42620, R 408.42622, R 408.42640, and R 408.42648.

# APPENDIX I
# HAND SIGNALS (Mandatory)



## NOTICE OF PUBLIC HEARING

STATE OF MICHIGAN
DEPARTMENT OF LABOR AND ECONOMIC GROWTH
MICHIGAN OCCUPATIONAL HEALTH AND SAFETY ADMINISTRATION
MIOSHA STANDARDS SECTION

NOTICE OF PUBLIC HEARING

**MIOSHA Construction Safety Standard Part 26 'Steel Erection'**
SOAHR #2005-082 LG

Please take notice that pursuant to the provisions of the Administrative Procedures Act (1969 PA 306, MCL 24.242) and MIOSHA (1974 PA 154 as amended, MCL 48.1019, and MCL 48.1021), the Department of Labor and Economic Growth will conduct a PUBLIC HEARING to allow all persons an opportunity to present data, views, questions, and arguments relative to proposed amendments as promulgated by the Construction Safety Standards Commission to CS Part 26 'Steel Erection' on:

November 29, 2005
**Operating Engineers Local 324 – Howell Education Center**
**275 East Highland Road (M-59)**
**Howell – Michigan 48843**
**1:30 p.m.**

Oral and/or written testimony will be accepted for the following proposed amendments to the Michigan Administrative Code:
R 408.42602, R 408.42605, R 408.42608, R 408.42609, R 408.42616, R 408.42628, R 408.42629, R 408.42634, R 408.42636, R 408.42640, R 408.42648, R 408.42651, and R 408.42655. The following are to be rescinded R 408.42624 and R 408.42625.

The proposed amendments will provide protection for Michigan workers involved in steel erection. Federal OSHA have cited this rule as being "not as effective as" their comparable standard being 1926 Subpart R - Steel Erection. The amended standard clarifies the definition of "headache ball," adds a definition for "load line standing platform," and specifically states when and how a connector may be lifted to the workstation via a headache ball. Also, R 408.42624 and R 408.42625 are being rescinded, as they are duplicative. These rules are proposed to take effect 14 days after filing with the Secretary of State.

The proposed amendments are published in the October 15, 2005 *Michigan Register*. Copies of the amendments may be obtained from the address listed below or you may download a copy of the proposed amendments from our website at http://www.state.mi.us/orr/emi/admincode.asp?AdminCode=Department&Dpt=LG&Level_1=MIOSHA

Michigan Department of Labor and Economic Growth
MIOSHA Standards Section
7150 Harris Drive - P.O. Box 30643
Lansing, MI 48909

Telephone 517.322.1845 - Facsimile 517.322.1775
E-mail: mparro@michigan.gov

Persons attending the hearings are urged to submit a written summary of remarks as part of their presentation. The submissions of a written statement will in no way prohibit or limit the right of oral expression by any persons at the hearings. Persons unable to attend the public hearings may submit separate written data, views, and arguments relative to the proposed amendments by mail, e-mail, or facsimile and must be received no later than 5:00 p.m. on November 30, 2005.

David C. Hollister, Director
Michigan Department of Labor and Economic Growth

Tom Boensch, Vice Chairperson
Construction Safety Standards Commission

*The public hearings will be conducted in compliance with the 1990 Americans with Disabilities Act, in an accessible building with handicapper parking available. Persons with disabilities requiring additional accommodations in order to participate in the meeting should call 517-322-1845 at least 14 days prior to the hearing.*

## CERTIFICATE OF NEED
## REVIEW STANDARDS

*MCL 24.208 states in part:*

*Sec. 8. The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:*

* * *

*(k) All of the items in section 7(l) after final approval by the certificate of need commission or the statewide health coordinating council under section 22215 or 22217 of the public health code, 1978 PA 368, MCL 333.22215 and 333.2217.*

*MCL 24.207 states in part:*

*Sec. 7. "Rule" means an agency regulation, statement, standard, policy, ruling, or instruction of general applicability that implements or applies law enforced or administered by the agency, or that prescribes the organization, procedure, or practice of the agency, including the amendment, suspension, or rescission of the law enforced or administered by the agency. Rule does not include any of the following:*

* * *

*(l) All of the following, after final approval by the certificate of need commission or the statewide health coordinating council under section 22215 or 22217 of the public health code, 1978 PA 368, MCL 333.22215 and 333.22217:*
*(i) The designation, deletion, or revision of covered medical equipment and covered clinical services.*
*(ii) Certificate of need review standards*
*(iii) Data reporting requirements and criteria for determining health facility viability.*
*(iv) Standards used by the department of community health in designating a regional certificate of need review agency.*
*(v) The modification of the 100 licensed bed limitation for short-term nursing care programs set forth in section 22210 of the public health code, 1978 PA 368, MCL 333.22210.*

## CERTIFICATE OF NEED REVIEW STANDARDS

# MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
# CERTIFICATE OF NEED (CON) REVIEW STANDARDS
# FOR BONE MARROW TRANSPLANTATION SERVICES

(By authority conferred on the CON Commission by Section 22215 of Act No. 368 of the Public Acts of 1978, as amended, and sections 7 and 8 of Act No. 306 of the Public Acts of 1969, as amended, being sections 333.22215, 24.207, and 24.208 of the Michigan Compiled Laws.)

### Section 1. Applicability

Sec. 1. (1) These standards are requirements for the approval and delivery of services for all projects approved and Certificates of Need issued under Part 222 of the Code which involve bone marrow transplantation services.

(2) A bone marrow transplantation service is a covered clinical service for purposes of Part 222 of the Code.

(3) A bone marrow transplantation service listed on the Department inventory that is not located at a licensed hospital site and that performs only autologous bone marrow transplantation procedures using stem cells obtained from the peripheral circulation shall be required to obtain CON approval to provide a bone marrow transplantation service that performs allogeneic bone marrow transplantation procedures or bone marrow transplantation procedures that use stem cells obtained from any other source other than the peripheral circulation. A bone marrow transplantation service listed on the Department inventory that is located at a hospital site and initially does not perform both allogeneic and autologous procedures shall not be required to obtain separate CON approval to begin performing both autologous and allogeneic bone marrow transplant procedures.

(4) An existing bone marrow transplantation service that performs only adult procedures shall require separate CON approval in order to perform pediatric procedures. An existing bone marrow transplantation service that performs only pediatric procedures shall require separate CON approval in order to perform adult procedures.

(5) The Department shall use Section 3, as applicable, in applying Section 22225(1) of the Code, being Section 333.22225(1) of the Michigan Compiled Laws.

(6) The Department shall use Section 6, as applicable, in applying Section 22225(2)(c) of the Code, being Section 333.22225(2)(c) of the Michigan Compiled Laws.

### Section 2. Definitions

Sec. 2. (1) As used in these standards:

(a) "Acquisition of a bone marrow transplantation service" means the acquisition (including purchase, lease, donation, or other arrangement) of an existing bone barrow transplantation service.

(b) "Adult," for purposes of these standards, means an individual age 18 or older.

(c) "Allogeneic" means transplantation between genetically nonidentical individuals of the same species.

(d) "Autologous" means transplantation in which the donor and recipient are the same individual.

(e) "Bone marrow transplantation service" means the transplantation of proliferating hematopoietic stem cells essential to the survival of a patient derived from the bone marrow, the peripheral circulation, cord blood, or any other source.

(f) "Cancer hospital" means a hospital that has been approved to participate in the Title XVIII (Medicare) program as a prospective payment system (PPS) exempt hospital in accordance with Section 1886 (d)(1)(B)(v) of the Social Security Act, as amended.

(g) "Certificate of Need Commission" or "CON Commission" means the Commission created pursuant to Section 22211 of the Code, being Section 333.22211 of the Michigan Compiled Laws.

(h) "Comparative group" means the applications that have been grouped for the same type of project in the same planning area and are being reviewed comparatively in accordance with the CON rules.

(i) "Code" means Act No. 368 of the Public Acts of 1978, as amended, being Section 333.1101 et seq. of the Michigan Compiled Laws.

(j) "Department" means the Michigan Department of Community Health (MDCH).

(k) "Department inventory of bone marrow transplantation services" means the list maintained by the Department of: (i) the bone marrow transplantation services operating pursuant to a valid CON issued under Part 222 or former Part 221; (ii) operating bone marrow transplantation services for which the operation of that service did not require a CON; and (iii) bone marrow transplantation services that are not yet operational but have a valid CON issued under Part 222. The list shall inventory adult and pediatric services separately and shall specify the site at which the bone marrow transplantation service is authorized.

(l) "Existing bone marrow transplantation service," for purposes of Section 3(5) of these standards, means any of the following: (i) a bone marrow transplantation service listed on the Department inventory, (ii) a proposed bone marrow transplantation service under appeal from a final decision of the Department, or (iii) a proposed bone marrow transplantation service that is part of a completed application under Part 222 (other than the application under review) for which a proposed decision has been issued and which is pending final decision.

(m) "Health service area" or "HSA" means the geographic area set forth in Section 8.

(n) "Implementation plan" means a plan that documents how a proposed bone marrow transplantation service will be initiated within the time period specified in these standards or the CON rules. At a minimum, the implementation plan shall identify:

(i) each component or activity necessary to begin performing the proposed bone marrow transplantation service including, but not limited to, the development of physical plant requirements, such as an intensive care unit capable of treating immuno-suppressed patients, equipment acquisitions, and recruitment and employment of all physician and support staff;

(ii) the time table for completing each component or activity specified in subsection (i); and

(iii) if the applicant previously has been approved for a bone marrow transplantation service for which either the CON expired or the service did not perform a transplant procedure during any consecutive 12-month period, what changes have or will be made to ensure that the proposed service can be initiated and provided on a regular basis.

(o) "Initiate" or "implement" for purposes of these standards, means the performance of the first transplant procedure. The term of an approved CON shall be 18 months or the extended period established by Rule 325.9403(2), if authorized by the Department.

(p) "Initiate a bone marrow transplantation service" means to begin operation of a bone marrow transplantation service at a site that does not provide either adult or pediatric bone marrow

transplantation services and is not listed on the Department inventory as of the date an application is submitted to the Department. The term includes an adult service that is proposing to provide a pediatric bone marrow transplantation service, and a pediatric service that is proposing to provide an adult bone marrow transplantation service. The term does not include beginning operation of a bone transplantation service by a cancer hospital which acquires an existing bone marrow transplantation service provided that all of the staff, services, and programs required under section 3(3) are to be provided by the cancer hospital and/or by the hospital from which the bone marrow transplantation service is being acquired.

(q) "Institutional Review Board" or "IRB" means an institutional review board as defined by Public Law 93-348 which is regulated by Title 45 CFR 46.

(r) "Licensed site" means either:

(i) in the case of a single site hospital, the location of the facility authorized by license and listed on that licensee's certificate of licensure or

(ii) in the case of a hospital with multiple sites, the location of each separate and distinct inpatient unit of the health facility as authorized by license and listed on that licensee's certificate of licensure.

(s) "Medicaid" means title XIX of the social security act, chapter 531, 49 Stat. 620, 1396r-6 and1396r-8 to 1396v.

(t) "Pediatric" means, for purposes of these standards, any patient 20 years of age or less or any patient with congenital conditions or diseases for which bone marrow transplantation is a treatment.

(u) "Planning area" means:

(i) for an adult bone marrow transplantation service, the state of Michigan.

(ii) for a pediatric bone marrow transplantation service, either:

(A) planning area one that includes the counties in health service areas 1, 2, 5, and 6, and the following counties in health service area 7: Alcona, Alpena, Cheboygan, Crawford, Montmorency, Oscoda, Otsego, and Presque Isle; or

(B) planning area two that includes the counties in health service areas 3, 4, and 8, and the following counties in health service area 7: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, and Wexford.

(v) "Qualifying project" means each application in a comparative group that has been reviewed individually and has been determined by the Department to have satisfied all of the requirements of Section 22225 of the Code, being Section 333.22225 of the Michigan Compiled Laws, and all other applicable requirements for approval in the Code and these standards.

(w) "Survival rate" means, for purposes of these standards, the rate calculated using the Kaplan-Meier technique and the following: (i) the date of transplantation (or, if more than one transplant is performed, the date of the first transplant) must be the starting date for calculation of the survival rate; (ii) for those dead, the date of death is used, if known. If the date of death is unknown, it must be assumed as 1 day after the date of the last ascertained survival; (iii) for those who have been ascertained as surviving within 60 days before the fiducial date (the point in time when the facility's survival rates are calculated and its experience is reported), survival is considered to be the date of the last ascertained survival, except for patients described in subsection (v); (iv) any patient who is not known to be dead, but whose survival cannot be ascertained to a date that is within 60 days before the fiducial date, must be considered as "lost to follow up" for the purposes of the survival rate calculation; (v) any patient transplanted between 61 and 120 days before the fiducial date must be considered as "lost to follow up" if he or she is not known to be dead and his or her survival has not been ascertained for at least 60 days before the fiducial date. Any patient transplanted within 60 days before the fiducial date must be considered as "lost to follow up" if he or she is not known to be dead and his or her survival has not been ascertained on the fiducial date; and (vi) the survival analyses must use the assumption that each

patient in the "lost to follow up" category died 1 day after the last date of ascertained survival. However, an applicant may submit additional analyses that reflect each patient in the "lost to follow up" category as alive at the date of the last ascertained survival.

(2) The definitions of Part 222 shall apply to these standards.

**Section 3. Requirements for approval for applicants proposing to initiate a bone marrow transplantation service**

Sec. 3. (1) An applicant proposing to initiate a bone marrow transplantation service shall specify in the application whether the proposed service will perform either or both adult and pediatric bone marrow transplant procedures.

(2) An applicant shall specify the licensed hospital site at which the bone marrow transplantation service will be provided.

(3) An applicant proposing to initiate either an adult or pediatric bone marrow transplantation service shall demonstrate that the licensed hospital site at which the transplants will be offered provides each of the following staff, services, and programs, as of the date an application is submitted to the Department:

(a) operating rooms.

(b) continuous on-site availability, either immediate or on-call, of CT scanning, magnetic resonance imaging, ultrasound, angiography, and nuclear medicine services.

(c) dialysis.

(d) inpatient-outpatient social work.

(e) inpatient-outpatient psychiatry/psychology.

(f) clinical research.

(g) a microbiology and virology laboratory.

(h) a histocompatibility laboratory that meets the standards of the American Society for Histocompatibility and Immunogenetics, or an equivalent organization, either on-site or through written agreement.

(i) a hematopathology lab capable of performing cell phenotype analysis using flow cytometry.

(j) a clinical chemistry lab with the capability to monitor antibiotic and antineoplastic drug levels, available either on-site or through other arrangements that assure adequate availability.

(k) other support services, as necessary, such as physical therapy and rehabilitation medicine.

(l) continuous availability of anatomic and clinical pathology and laboratory services, including clinical chemistry, and immuno-suppressive drug monitoring.

(m) continuous availability of red cells, platelets, and other blood components.

(n) an active medical staff that includes, but is not limited to, the following board-certified or board-eligible specialists. For an applicant that is proposing to perform pediatric transplant procedures, these specialists shall be board-certified or board-eligible in the pediatric discipline of each specialty.

(i) anesthesiology.

(ii) cardiology.

(iii) critical care medicine.

(iv) gastroenterology.

(v) general surgery.

(vi) hematology.
(vii) infectious diseases.
(viii) nephrology.
(ix) neurology.
(x) oncology.
(xi) pathology, including blood banking experience.
(xii) pulmonary medicine.
(xiii) radiation oncology.
(xiv) radiology.
(xv) urology.

(o) One or more consulting physicians who are board-certified or board-eligible in each of the following specialties. For an applicant proposing to perform pediatric bone marrow transplant procedures, these specialists shall have specific experience in the care of pediatric patients.
(i) dermatology.
(ii) immunology.
(iii) neurosurgery.
(iv) orthopedic surgery.

(4) An applicant must provide, at the time the CON application is submitted, an implementation plan for the proposed bone marrow transplantation service.

(5)(a) An applicant shall demonstrate that the number of existing adult bone marrow transplantation services in the planning area identified in Section 2(1)(s)(i) does not exceed three (3) adult bone marrow transplantation services and that approval of the proposed application will not result in the total number of adult bone marrow transplantation services exceeding three (3) in the planning area.

(b) An applicant shall demonstrate that the number of existing pediatric bone marrow transplantation services does not exceed two (2) pediatric bone marrow transplantation services in planning area one identified in Section 2(1)(s)(ii)(A) or one (1) pediatric bone marrow transplantation service in planning area two identified in Section 2(1)(s)(ii)(B) and that approval of the proposed application will not result in the total number of pediatric bone marrow transplantation services exceeding the need for each specific pediatric planning area.

(6)(a) An applicant proposing to initiate an adult bone marrow transplantation service that will perform only allogeneic transplants, or both allogeneic and autologous transplants, shall project that at least 10 allogeneic transplant procedures will be performed in the third 12-months of operation. An applicant proposing to initiate an adult bone marrow transplantation service that will perform only autologous procedures shall project that at least 10 autologous transplant procedures will be performed in the third 12-months of operation.

(b) An applicant proposing to initiate a pediatric bone marrow transplantation service that will perform only allogeneic transplants, or both allogeneic and autologous transplants, shall project that at least 10 allogeneic transplant procedures will be performed in the third 12-months of operation. An applicant proposing to initiate a pediatric bone marrow transplantation service that will perform only autologous procedures shall project that at least 10 autologous transplant procedures will be performed in the third 12-months of operation.

(c) An applicant proposing to initiate both an adult and a pediatric bone marrow transplantation service shall specify whether patients age 18-20 are included in the projection of adult procedures required pursuant to subsection (a) or the projection of pediatric procedures required pursuant to

subsection (b). An applicant shall not include patients age 18-20 in both adult and pediatric projections required pursuant to subsections (a) and (b).

(7) An applicant shall provide on-site megavoltage radiation therapy services with a nominal beam energy of at least 6 MEV, including the capability to perform total body irradiation.

(8) An applicant shall demonstrate, at the time an application is submitted to the Department, that the licensed hospital site at which the proposed bone marrow transplantation service is proposed has an institutional review board.

(9) An applicant proposing to initiate a pediatric bone marrow transplantation service shall demonstrate that the licensed hospital site at which the pediatric transplant procedures will be performed has each of the following, at the time an application is submitted to the Department:

(a) a designated pediatric inpatient oncology unit.

(b) a pediatric inpatient intensive care unit.

(c) membership status in either the Pediatric Oncology Group (POG) or the Children's Cancer Group (CCG).

(d) a pediatric tumor board that meets on a regularly scheduled basis.

(e) family support group services, provided either directly or through written agreements.

(f) a pediatric cancer program with the following staff:

(i) a director who is either a board-certified immunologist who has specific training and experience in bone marrow transplantation or a board-certified pediatric hematologist/oncologist.

(ii) nurses with training and experience in pediatric oncology.

(iii) social workers with training and experience in pediatric oncology.

(iv) pediatric psychologists.

(v) child life specialists.

(10)(a) An applicant proposing to initiate either a new adult or pediatric bone marrow transplantation service shall submit, in its application, a written consulting agreement with an existing bone marrow transplantation service that meets each of the requirements in subsection (b).

(b) The written consulting agreement required by subsection (a) shall specify the term of the agreement and the roles and responsibilities of both the existing and proposed service, including at least the following:

(i) The term of the written consulting agreement is no less than 36 months after the proposed service begins to perform bone marrow transplant procedures.

(ii) One or more representatives of the existing bone marrow transplantation service have been designated as staff responsible for carrying out the roles and responsibilities of the existing service.

(iii) The existing service shall evaluate and make recommendations to the proposed service on policies and procedures, including time tables, for at least each of the following:

(A) nursing services.

(B) infection control.

(C) nutritional support.

(D) staff needs and training.

(E) inpatient and outpatient medical coverage.

(F) transfusion and blood bank policies.

(G) transplant treatment protocols.

(H) hematopoiesis laboratory services and personnel.

(I) data management.

(J) quality assurance program.

(iv) Specify a schedule of site visits by staff of the existing bone marrow transplantation service that, at a minimum, includes:

(A) 6 visits during the first 12-months of operation of the proposed service.

(B) 4 visits during each the second 12-months and third 12-months of operation of the proposed service.

(v) Specify that the purpose of the site visits required by subdivision (iv) is to assess the proposed service and make recommendations related to quality assurance mechanisms of the proposed service, including at least each of the following:

(A) a review of the number of patients transplanted.

(B) transplant outcomes.

(C) all infections requiring treatment or life-threatening toxicity, defined for purposes of this agreement as National Cancer Institutes grade #3 or greater toxicity, excluding hematological toxicity.

(D) all deaths occurring within 100 days from transplant.

(E) each of the requirements of subdivision (iii).

(vi) Specify that a written report and minutes of each site visit shall be completed by the existing bone marrow transplantation service and sent to the proposed service within 2 weeks of each visit, and that copies of the reports and minutes shall be available to the Department upon request. At a minimum, the written report shall address each of the items in subdivision (v).

(vii) Specify that the existing bone marrow transplantation service shall notify the Department and the proposed service immediately if it determines that the proposed service may not be in compliance with any applicable quality assurance requirements, and develop jointly with the proposed service a plan for immediate remedial actions.

(viii) Specify that the existing bone marrow transplantation service shall notify the Department immediately if the consulting agreement required pursuant to these standards is terminated and that the notification shall include a statement describing the reasons for the termination.

(c) For purposes of subsection (10), "existing bone marrow transplantation service" means a service that meets all of the following:

(i) currently is and has been performing, for at least 3 years, the types of transplants (allogeneic or autologous; adult or pediatric) proposed to be performed by the applicant.

(ii) performed at least 15 pediatric allogeneic transplants or 40 adult allogeneic transplants in the most recent 12-month period prior to the date an application is submitted to the Department.

(iii) currently is certified by the National Marrow Donor Program and is located in the United States.

(d) An applicant shall document that the existing bone marrow transplantation service meets the requirements of subsection (c).

**Section 4. Additional requirements for applications included in comparative reviews**

Sec. 4. (1) Any application subject to comparative review under Section 22229 of the Code, being Section 333.22229 of the Michigan Compiled Laws, or these standards, shall be grouped and reviewed with other applications in accordance with the CON rules applicable to comparative reviews.

(2)(a) A qualifying project will have points awarded based on the number of bone marrow transplantation services, adult or pediatric, as applicable, listed on the Department inventory in the

health service area in which the proposed service will be located, on the date the application is submitted to the Department, as shown in the following schedule:

| Number of BMT Transplant Services (adult or pediatric, as applicable) in HSA | Points Awarded |
|---|---|
| Two or more services | 0 |
| One service | 2 |
| No services | 4 |

(b) A qualifying project will have up to 4 points awarded based on the percentage of the medical/surgical indigent volume at the licensed hospital site at which the proposed bone marrow transplantation service will be provided in accordance with the following:

(i) For each applicant in the same comparative group, determine the medical/surgical indigent volume, rounded to the nearest whole number, for each licensed hospital site at which a bone marrow transplantation service is proposed to be provided. Determine the licensed hospital site that has the highest indigent volume in the same comparative group. Divide the medical/surgical indigent volume for that licensed hospital site by 4.0. The result is the indigent volume factor.

(ii) For each applicant in the same comparative group, divide the medical/surgical indigent volume by the indigent volume factor determined in subdivision (i). The result, to the first decimal place, is the number of points that will be awarded to each applicant pursuant to this subsection.

For purposes of this subsection, indigent volume means the ratio of a hospital's indigent charges to its total charges expressed as a percentage as determined by the Michigan Department of Community Health Medical Services Administration pursuant to Chapter VIII of the Medical Assistance Program Hospital Manual. The indigent volume data being used for rates in effect at the time the application is deemed submitted will be used by the Department in determining the number of points awarded to each qualifying project.

(c) A qualifying project will have 2 points awarded if an applicant documents that, during the 36-month period prior to the date an application is submitted to the Department, at least 15 patients received pre- and post-transplant care at the licensed hospital site at which the bone marrow transplant procedures will be performed and were referred for and received a bone marrow transplant at an existing bone marrow transplantation service, and submits documentation from the existing bone marrow transplantation service(s) of these referrals.

(3) Each application in a comparative review group shall be individually reviewed to determine whether the application has satisfied all the requirements of Section 22225 of the Code, being Section 333.22225 of the Michigan Compiled Laws, and all other applicable requirements for approval in the Code and these standards. If the Department determines that one or more of the competing applications satisfies all of the requirements for approval, these projects shall be considered qualifying projects. The Department shall approve those qualifying projects which, taken together, do not exceed the need, as defined in Section 22225(1) being Section 333.22225(1) of the Michigan Compiled Laws, and which have the highest number of points when the results of subsection (2) are totaled. If two or more qualifying projects are determined to have an identical number of points, the Department shall approve those qualifying projects which, taken together, do not exceed the need, as defined in Section 22225(1) of the Code, being Section 333.22225(1) of the Michigan Compiled Laws, in the order in which the

applications were received by the Department, based on the date and time stamp placed on the application for CON form (form T-150-G-1.01 or any subsequent replacement form) by the Health Facilities Section(or the administrative unit of the Department responsible for administering the CON program) when an application is submitted.

(4) No points will be awarded to an applicant under specific subsections of Section 4 if information presented in Section 4 is inconsistent with related information provided in other portions of the CON application.

**Section 5. Requirements for approval -- all applicants**

Sec. 5. An applicant shall provide verification of Medicaid participation at the time the application is submitted to the Department. If the required documentation is not submitted with the application on the designated application date, the application will be deemed filed on the first applicable designated application date after all required documentation is received by the Department.

**Section 6. Project delivery requirements -- terms of approval for all applicants**

Sec. 6. (1) An applicant shall agree that, if approved, the bone marrow transplantation service shall be delivered in compliance with the following terms of CON approval:

(a) Compliance with these standards. An applicant shall immediately report to the Department any changes in key staff or other aspects of the bone marrow transplantation service that may affect its ability to comply with these standards.

(b) Compliance with applicable safety and operating standards.

(c) Compliance with the following quality assurance standards, as applicable, no later than the date the first bone marrow transplant procedure, allogeneic or autologous, is performed:

(i) An applicant shall establish and maintain, either on-site or through written agreements, all of the following:

(A) 24-hour blood bank support, including pheresis capability, irradiated blood, products suitable for cytomegalovirus-negative transplants, and blood component therapy.

(B) a cytogenetics and/or molecular genetic laboratory.

(C) a processing and cryopreservation laboratory that meets the standards of the Foundation for Accreditation of Hematopoietic Cell Therapy (FAHCT) or an equivalent organization.

(D) for a program that performs allogeneic transplants, a histocompatibility laboratory that has the capability of DNA-based HLA-typing and meets the standards of the American Society for Histocompatibility and Immunogenetics or an equivalent organization.

(E) anatomic and clinical pathology with competency in interpreting pathologic findings related to graft-v-host disease (programs performing allogeneic transplants) and other opportunistic infections in immuno-compromised hosts (programs performing allogeneic or autologous transplants).

(F) therapeutic drug monitoring.

(ii) An applicant shall establish and maintain, at the licensed hospital site at which the transplants are performed, both of the following:

(A) a protective environmental bone marrow transplant inpatient unit for immuno-suppressed patients that has an isolation policy, an infection control plan specific to that unit, and an air handling system capable of preventing nosocomial infections disseminated from central heating and cooling systems and ambient air.

(B) a specialized intensive care unit capable of treating immuno-suppressed neutropenic patients.

(iii) An applicant shall establish and maintain written policies related to outpatient care for bone marrow transplantation patients, including at least the following:

(A) the ability to evaluate and provide treatment on a 24-hour basis.

(B) nurses experienced in the care of bone marrow transplantation patients.

(C) a designated outpatient area for patients requiring long-duration infusions or the administration of multiple medications or blood product transfusions.

(iv) A bone marrow transplantation service shall establish and maintain a dedicated transplant team that includes at least the following staff:

(A) a transplant team leader, who is a physician that is board-certified in at least one of the following specialties: hematology, medical oncology, immunology, or pediatric hematology/oncology, as appropriate, and has had either at least one year of specific clinical training or two years of experience, both inpatient and outpatient, as an attending physician principally responsible for the clinical management of patients treated with hematopoietic transplantation. If the bone marrow transplantation service performs allogeneic transplants, the team leader's experience shall include the clinical management of patients receiving an allogeneic transplant. The responsibilities of the transplant team leader shall include overseeing the medical care provided by attending physicians, reporting required data to the Department, and responsibility for ensuring compliance with the all applicable project delivery requirements.

(B) one or more attending physicians with specialized training in pediatric and/or adult, as appropriate, bone marrow transplantation. If a service performs allogeneic transplants, at least one attending physician shall have specialized training in allogeneic transplantation, adult or pediatric, as appropriate. An attending physician shall be board-certified or board-eligible in hematology, medical oncology, immunology, or pediatric hematology/oncology, as appropriate.

(C) on-site availability of board-certified or board-eligible consulting physicians, adult and/or pediatric, as appropriate, in at least the following specialities: anatomic pathology with competence in graft versus host disease (services performing allogeneic transplants) and other opportunistic diseases (services performing allogeneic or autologous transplants), cardiology, gastroenterology, infectious diseases with experience in immuno-compromised hosts, nephrology, psychiatry, pulmonary medicine, and radiation oncology with experience in total body irradiation, and an intensivist who is board-certified in critical care.

(D) a transplant team coordinator, who shall be responsible for providing pre-transplant patient evaluation and coordinating treatment and post-transplant follow-up and care.

(E) a nurse to patient ratio necessary to provide care consistent with the severity of a patient's clinical status.

(F) nurses with specialized training in pediatric and/or adult, as appropriate, bone marrow transplantation, hematology/oncology patient care, administration of cytotoxic therapies, management of infectious complications associated with compromised host-defense mechanisms, administration of blood components, the hemodynamic support of the transplant patient, and managing immuno-suppressed patients.

(G) a pharmacist experienced with the use of cytotoxic therapies, use of blood components, the hemodynamic support of the transplant patient, and the management of immuno-suppressed patients.

(H) dietary staff capable of providing dietary consultations regarding a patient's nutritional status, including total parenteral nutrition.

(I) designated social services staff.

(J) designated physical therapy staff.

(K) data management personnel designated to the bone marrow transplantation service.

(L) for an applicant performing pediatric bone marrow transplants, a child-life specialist.

(v) In addition to the dedicated transplant team required in subdivision (iv), an applicant's staff shall include a patient ombudsman, who is familiar with the bone marrow transplantation service, but who is not a member of the transplant team.

(vi) An applicant shall develop and maintain patient management plans and protocols that include the following:

(A) therapeutic and evaluative procedures for the acute and long-term management of a patient.

(B) patient management and evaluation during the waiting, in-hospital and immediate post-discharge phases of the service.

(C) long-term management and evaluation, including education of the patient, liaison with the patient's attending physician, and the maintenance of active patient records for at least 5 years.

(D) IRB approval of all clinical research protocols, or if transplantation does not require an IRB-approved clinical research protocol, written policies and procedures that include at least the following: donor, if applicable, and recipient selection, transplantation evaluations, administration of the preparative regimen, post-transplantation care, prevention and treatment of graft-versus-host disease (allogeneic transplants), and follow-up care.

(vii) An applicant shall establish and maintain a written quality assurance plan.

(viii) An applicant shall implement a program of education and training for nurses, technicians, service personnel, and other hospital staff.

(ix) An applicant shall participate actively in the education of the general public and the medical community with regard to bone marrow transplantation, and make donation literature available in public areas of the institution.

(x) An applicant shall establish and maintain an active, formal multi-disciplinary research program related to the proposed bone marrow transplantation service.

(xi) An applicant shall operate, either on-site or under its direct control, a multi-disciplinary selection committee which includes, but is not limited to, a social worker, a mental health professional, and physicians experienced in treating bone marrow transplant patients.

(xii) A pediatric bone marrow transplant service shall maintain membership status in either the Pediatric Oncology Group (POG) or the Children's Cancer Group (CCG). If an applicant organization discontinues membership in either the POG or the CCG, an applicant shall obtain membership in the alternate organization within six months of discontinuing its membership.

(xiii) For purposes of evaluating subsection (c), except subdivision (xii), the Department shall consider it prima facie evidence as to compliance with the applicable requirements if an applicant documents that the bone marrow transplantation service is accredited by the National Marrow Donor Program (NMDP) or the Foundation for the Accreditation of Hematopoietic Cell Therapy (FAHCT).

(xiv) An applicant shall participate in Medicaid at least 12 consecutive months within the first two years of operation and continue to participate annually thereafter.

(d) Compliance with the following terms of approval:

(i) An applicant shall perform the applicable required volumes as follow:

(A) An adult bone marrow transplantation service that performs only allogeneic transplants, or both allogeneic and autologous transplants, shall perform at least 10 allogeneic transplants in the third 12-months of operation. If an adult service performs only autologous transplants, the service shall perform at least 10 autologous transplants in the third 12-months of operation. After the third 12-months of operation, an applicant shall perform at least 30 adult transplants in any 36-month consecutive period, with no fewer than 5 allogeneic in any 12-month period, beginning with the third 12-months of operation, and thereafter.

(B) A pediatric bone marrow transplantation service that performs only allogeneic transplants, or both allogeneic and autologous transplants, shall perform at least 10 allogeneic transplants in the third 12-months of operation. If a pediatric service performs only autologous transplants, the service shall

perform at least 10 autologous transplants in the third 12-months of operation. After the third 12-months of operation, an applicant shall perform at least 30 pediatric transplants in any 36-month consecutive period, with no fewer than 5 allogeneic transplants in any 12-month period, beginning with the third 12-months of operation, and thereafter.

(C) A bone marrow transplantation service that performs both adult and pediatric bone marrow transplants shall specify whether each patient age 18-20 is included in the category of adult procedures or the category of pediatric procedures. An applicant shall determine for each patient age 18-20 whether to record that patient as an adult or a pediatric procedure, but an applicant shall record each patient age 18-20 in only 1 category.

(ii) The applicant shall participate in a data collection network established and administered by the Department or its designee. The data may include, but is not limited to, annual budget and cost information, demographic and diagnostic information, primary and secondary diagnoses, whether the transplant procedure was a first or repeat transplant procedure, length of stay, the volume of care provided to patients from all payor sources, and other data requested by the Department and approved by the CON Commission. The applicant shall provide the required data on an individual basis for each designated licensed site; in a format established by the Department; and in a mutually-agreed upon media. The Department may elect to
verify the data through on-site review of appropriate records. In addition, an applicant shall report at least the following data for each patient:

(A) disease type.
(B) transplant type, i.e., related allogeneic, unrelated allogeneic, and autologous.
(C) source of hematopoietic stem cell, i.e., bone marrow, peripheral circulation, cord blood, etc.
(D) patient age, i.e., adult or pediatric as defined by these standards.
(E) data on 100-day, 6-month, 1-year, 2-year, and 5-year survival rates.
(F) relapse rates at 6-months, 1-year, and 5-years post-transplant.
(G) median follow-up, and patients lost-to-followup.
(H) cause(s) of death, if applicable.
(I) additional summary information, as applicable.

An applicant annually shall report for its bone marrow transplantation service annual and cumulative survival rates by type of transplant performed reported in actual number of transplants by disease category, transplant type, i.e., related allogeneic, unrelated allogeneic, and autologous; source of hematopoietic stem cell; patient age, i.e., adult or pediatric, as defined by these standards; and relapse rates at 100-days, 6-months, one year, and five years post-transplant. For purposes of these standards, procedure-related mortality is defined as death occurring within 100 days from bone marrow transplant.

(iii) The applicant shall maintain an organized institutional transplant registry for recording ongoing information on its patients being evaluated for transplant and on its transplant recipients and shall participate in the national and international registries applicable to the bone marrow transplantation service.

(iv) An applicant, to assure that the bone marrow transplantation service(s) will be utilized by all segments of the Michigan population, shall:

(A) not deny the services to any individual based on ability to pay or source of payment;

(B) provide the services to all individuals in accordance with the patient selection criteria developed by appropriate medical professionals, and approved by the Department; and

(C) maintain information by payor and non-paying sources to indicate the volume of care from each source provided annually.

Compliance with selective contracting requirements shall not be construed as a violation of this term.

(v) The applicant shall provide the Department with a notice stating the date on which the first transplant procedure is performed and such notice shall be submitted to the Department consistent with

applicable statute and promulgated rules. An applicant that initially does not perform both allogeneic and autologous procedures also shall notify the Department when it begins to perform either allogeneic or autologous procedures, whichever was not performed initially by the applicant.

(vi) An applicant shall notify the Department immediately if the consulting agreement required pursuant to Section 3(10) of these standards is terminated prior to the end of the first 36-months of operation of the bone marrow transplantation service. The notification shall include a statement describing the reasons for the termination. An applicant shall have 30 days following termination of that agreement to enter into a written consulting agreement that meets the requirements of Section 3(10). An applicant shall provide the Department with a copy of that written consulting agreement.

(vii) The Department may use the information provided pursuant to Section 3(10) of these standards in evaluating compliance with the requirements of this section.

(2) The agreements and assurances required by this section, as applicable, shall be in the form of a certification authorized by the governing body of the applicant or its authorized agent.

**Section 7. Documentation of projections**

Sec. 7. An applicant required to project volumes of service under Section 3 shall specify how the volume projections were developed. This specification of projections shall include a description of the data source(s) used, assessments of the accuracy of these data, and the statistical method used to make the projections. Based on this documentation, the Department shall determine if the projections are reasonable.

**Section 8. Requirements for approval – acquisition of a bone marrow transplantation service by a cancer hospital**

(1) An applicant proposing to acquire an existing bone marrow transplantation service shall demonstrate that it meets all of the requirements of this subsection and shall not be required to be in compliance with section 3(5) and the department inventory.

(a) The total number of bone marrow transplantation services is not increased in the planning area as the result of the acquisition.

(b) As part of the acquisition of the bone marrow transplantation service, the acquisition or replacement of the cancer hospital, or for any other reasons, the location of the bone marrow transplantation service shall be located at its prior location or in space within the licensed cancer hospital site.

(c) The applicant is a cancer hospital as defined by these standards. The applicant shall, to the satisfaction of the Department, provide verification of PPS-exemption at the time of application, or shall demonstrate compliance with the following to the satisfaction of the Department:

(i) The applicant, or an affiliate of the applicant, operates a comprehensive cancer center recognized by the National Cancer Institute in conjunction with a Michigan university that is designated as a comprehensive cancer center, or the applicant is the Michigan university that is designated as a comprehensive cancer center.

(ii) The applicant commits to provide evidence, satisfactory to the Department, of approval as a PPS-exempt hospital within the time limits specified in subsection (g).

(d) The applicant demonstrates that it meets, directly or through arrangements with the hospital from which it acquires the bone marrow transplantation service, the requirements set forth under section 3(3), (6), (7), and (8), as applicable.

(e) The applicant agrees to either have a written consulting agreement as required by Section 3(10) or obtain a determination by the Department that such an agreement is not required because the existing bone marrow transplantation staff, services, and program substantially will continue to be in place after the acquisition.

(f) The applicant agrees and assures to comply, either directly or through arrangements with the hospital from which it acquires the bone marrow transplantation service, with all applicable project delivery requirements.

(g) If the applicant described in this subsection does not meet the Title XVIII requirements of the Social Security Act for exemption from PPS within 24 months after receiving CON approval under this section, the Department may extend the 24-month deadline to no later than the last session day permitted by the United States Constitution for the United States Congress then in session. Extension of the deadline shall require demonstration by the applicant, to the satisfaction of the Department, that there has been progress toward achieving the changes in federal law and regulations that are required to secure the PPS exemption. If the applicant fails to meet the Title XVIII requirements for PPS exemption within the 24-month period, or its possible extension, then the CON granted pursuant to this section shall expire automatically and will not be subject to further applications for acquisition. However, prior to the final deadline for the expiration of the CON, the prior holder of the (CON/authorization) to provide the bone marrow transplantation service may apply for acquisition of the service, pursuant to all the provisions of this section, except for subsection (c).

**(2) Applicants proposing to acquire an existing bone marrow transplantation service under this section shall not be subject to comparative review.**

**Section 9. Health Service Areas**

Sec. 9. Counties assigned to each health service area are as follows:

| HSA | | COUNTIES | |
|---|---|---|---|
| 1 | Livingston | Monroe | St. Clair |
| | Macomb | Oakland | Washtenaw |
| | Wayne | | |
| 2 | Clinton | Hillsdale | Jackson |
| | Eaton | Ingham | Lenawee |
| 3 | Barry | Calhoun | St. Joseph |
| | Berrien | Cass | Van Buren |
| | Branch | Kalamazoo | |
| 4 | Allegan | Mason | Newaygo |
| | Ionia | Mecosta | Oceana |
| | Kent | Montcalm | Osceola |
| | Lake | Muskegon | Ottawa |
| 5 | Genesee | Lapeer | Shiawassee |
| 6 | Arenac | Huron | Roscommon |

| | | | |
|---|---|---|---|
| | Bay | Iosco | Saginaw |
| | Clare | Isabella | Sanilac |
| | Gladwin | Midland | Tuscola |
| | Gratiot | Ogemaw | |
| 7 | Alcona | Crawford | Missaukee |
| | Alpena | Emmet | Montmorency |
| | Antrim | Gd Traverse | Oscoda |
| | Benzie | Kalkaska | Otsego |
| | Charlevoix | Leelanau | Presque Isle |
| | Cheboygan | Manistee | Wexford |
| 8 | Alger | Gogebic | Mackinac |
| | Baraga | Houghton | Marquette |
| | Chippewa | Iron | Menominee |
| | Delta | Keweenaw | Ontonagon |
| | Dickinson | Luce | Schoolcraft |

**Section 10. Department Inventory of Bone Marrow Transplantation Services**

Sec 10. The Department shall maintain, and provide on request, a listing of the Department Inventory of bone marrow transplantation services.

**Section 11. Effect on prior CON Review Standards; comparative reviews**

Sec. 11. (1) These CON review standards supersede and replace the CON Review Standards for Extrarenal Transplantation Services pertaining to bone marrow transplantation services approved by the CON Commission on March 9, 2004 and effective on June 4, 2004.

## CORRECTION OF OBVIOUS ERRORS IN PUBLICATION

*MCL 24.256(1) states in part:*

*"Sec. 56. (1) The State Office of Administrative Hearings and Rules shall perform the editorial work for the Michigan register and the Michigan Administrative Code and its annual supplement. The classification, arrangement, numbering, and indexing of rules shall be under the ownership and control of the State Office of Administrative Hearings and Rules, shall be uniform, and shall conform as nearly as practicable to the classification, arrangement, numbering, and indexing of the compiled laws. The State Office of Administrative Hearings and Rules may correct in the publications obvious errors in rules when requested by the promulgating agency to do so…"*

## CORRECTION OF OBVIOUS ERRORS IN PUBLICATION

NOTICE OF PUBLIC HEARING CORRECTION
DEPARTMENT OF ENVIRONMENTAL QUALITY
AIR QUALITY DIVISION

**[Note: The time of the public hearing is corrected to 10:00 a.m., and the rule numbers in bold are corrected. The rules were printed in the October 1, 2005, Michigan Register.]**

The Michigan Department of Environmental Quality (DEQ), Air Quality Division, will conduct a public hearing on proposed administrative rules promulgated pursuant to Part 55, Air Pollution Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended (Act 451). The DEQ proposes to add Part 18, Prevention of Significant Deterioration (PSD) of Air Quality, R 336.2801 to R 336.2819, **R 336.2823, and R 336.2830**. The proposed rules will adopt a state PSD air permit program, which will be submitted to the U.S. Environmental Protection Agency as a revision to the State Implementation Plan.

The public hearing will be held on October 31, 2005, at **10:00 a.m.**, in the ConCon Conference Room, Constitution Hall, Atrium South, 525 West Allegan Street, Lansing, Michigan.

Copies of the proposed rules (ORR 2004-008EQ) can be downloaded from the Internet at: http://www.michigan.gov/deqair. These rules can also be downloaded from the Internet through the State Office of Administrative Hearings and Rules at http://www.michigan.gov/orr. Copies of the rules may also be obtained by contacting the Lansing office at:

Air Quality Division
Michigan Department of Environmental Quality
P.O. Box 30260
Lansing, Michigan 48909-7760
Phone: 517-373-7045
Fax: 517-241-7499
E-Mail: halbeism@Michigan.gov

All interested persons are invited to attend and present their views. It is requested that all statements be submitted in writing for the hearing record. Anyone unable to attend may submit comments in writing to the address above. Written comments must be received by October 31, 2005.

Persons needing accommodations for effective participation in the meeting should contact the Air Quality Division at 517-373-7045 one week in advance to request mobility, visual, hearing, or other assistance.

This notice of public hearing is given in accordance with Sections 41 and 42 of Michigan's Administrative Procedures Act, 1969 PA 306, as amended, being Sections 24.241 and 24.242 of the Michigan Compiled Laws. Administration of the rules is by authority conferred on the Director of the DEQ by Sections 5503, 5505, and 5512 of Act 451, being Sections 324.5503 and 324.5512 of the Michigan Compiled Laws, and Executive Order 1995-18. These rules take immediate effect after filing with the Secretary of State.

# EXECUTIVE ORDERS
# AND
# EXECUTIVE REORGANIZATION ORDERS

*MCL 24.208 states in part:*

*"Sec. 8. (1) The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:*

*(a) Executive orders and executive reorganization orders."*

## EXECUTIVE ORDERS

### EXECUTIVE ORDER No.2005 – 23

**STATE OF ENERGY EMERGENCY**
**WAIVER OF REGULATIONS RELATING TO MOTOR CARRIERS AND DRIVERS TRANSPORTING GASOLINE, DIESEL FUEL, JET FUEL, PROPANE, NATURAL GAS, COMPRESSED NATURAL GAS, AND ETHANOL**

WHEREAS, Section 1 of Article V of the Michigan Constitution of 1963 vests the executive power of the State of Michigan in the Governor;

WHEREAS, under Section 4 of 1982 PA 191, MCL 10.84, during a declared State of Energy Emergency the Governor may by executive order suspend a statute, order, rule of a state agency, or specific provision of a statute, order, or rule if strict compliance with the statute, order, rule, or a specific provision of the statute, order, or rule will prevent, hinder, or delay necessary action in coping with an energy emergency;

WHEREAS, based on the effects of Hurricane Katrina, Executive Order 2005-16 declared a State of Energy Emergency in this state beginning on August 31, 2005;

WHEREAS, because Hurricane Katrina has temporarily halted the off-shore production of petroleum products in the Gulf of Mexico and damaged storage facilities and transportation infrastructure throughout the Gulf Coast region, the effects of Hurricane Katrina are being felt throughout the United States;

WHEREAS, the United States Department of Transportation Federal Motor Carrier Safety Administration has declared that a regional transportation emergency continues to exist in the highway transportation of certain petroleum products in both the EasternRegion of the United States (Connecticut, Delaware, the District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island, Vermont, Virginia, and West Virginia) and the Southern Region of the United States (Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, New Mexico, Oklahoma, South Carolina, Tennessee, and Texas);

WHEREAS, as a result of a Revised Declaration of Regional Emergency, the Federal Motor Carrier Safety Administration, acting pursuant to 49 CFR 390.23, has exempted motor carriers and drivers transporting gasoline, diesel fuel, jet fuel, propane, natural gas, compressed natural gas, and ethanol to and from the Eastern Region and the Southern Region from 49 CFR Parts 390-399 to address emergency needs arising from the Hurricane Katrina disaster (such as fuel supply shortages). The exemption is effective from 1:00 p.m. EDT, September 14, 2005 until 11:59 p.m. EDT, October 5, 2005;

WHEREAS, the federal exemption for motor carriers or drivers extends outside of the Eastern Region or Southern Region of the United States to any portion of a trip that occurs outside of the Eastern or Southern Regions;

NOW, THEREFORE, I, JENNIFER M. GRANHOLM, Governor of the State of Michigan, by virtue of the power and authority vested in the Governor by the Michigan Constitution of 1963 and Michigan law, order the following:

1. Motor carriers and drivers transporting gasoline, diesel fuel, jet fuel, propane, natural gas, compressed natural gas, and ethanol to and from the Eastern Region or the Southern Region of the United States to address emergency needs arising from the impact of Hurricane Katrina, such as fuel supply shortages, are exempt from compliance with any applicable state statute, order, or rule substantially similar to 49 CFR Parts 390-399. Any such provision of a state statute, order, or rule is suspended. The exemption and suspension under this Order is effective until 11:59 p.m. EDT, October 5, 2005.

2. No other petroleum products are covered by this Order.

3. Nothing in this Order shall be construed as an exemption from applicable controlled substances and alcohol use and testing requirements (49 CFR Part 382 and any similar state statute, order, or rule), the commercial driver's license requirements (49 CFR Part 383 and any similar state statute, order, or rule), the financial responsibility requirements (49 CFR Part 387 and any similar state statute, order, or rule), applicable size and weight requirements, or any portion of federal regulations not specifically identified.

4. Motor carriers or drivers currently subject to an out-of-service order are not eligible for the exemption and suspension until the out-of-service order expires or the conditions for rescission have been satisfied.

5. The Federal Motor Carrier Safety Administration has required that drivers for motor carriers operating under the Revised Declaration of Regional Emergency issued under federal regulations have a copy of the federal Revised Declaration of Regional Emergency in their possession. Copies of the two applicable federal revised declarations are attached to this Order.

6. The Motor Carrier Division of the Department of State Police shall coordinate state compliance with this Order.
This Order is effective until the earliest of any of the following:

a. A finding by the Governor that the State of Energy Emergency declared under Executive Order 2005-16 no longer exists.

b. Rescission of this Order.

c. 11:59 p.m. EDT, Wednesday, October 5, 2005.

This Order is effective upon filing.

Given under my hand and the Great Seal of the State of Michigan this
16th day of September in the year of our Lord, two thousand and five.

JENNIFER M. GRANHOLM
GOVERNOR

BY THE GOVERNOR:

SECRETARY OF STATE

## EXECUTIVE ORDERS

### EXECUTIVE ORDER No.2005 – 24

**STATE OF DISASTER**
**TEMPORARY SUSPENSION OF REQUIREMENTS RELATING TO PRESCRIPTION DRUGS**

WHEREAS, Section 1 of Article V of the Michigan Constitution of 1963 vests the executive power of the State of Michigan in the Governor;

WHEREAS, the destruction caused by Hurricane Katrina in the Gulf Coast region has resulted in numerous fatalities, injuries, and major devastation in the States of Alabama, Louisiana, and Mississippi;

WHEREAS, on September 4, 2005, Executive Order 2005-21 proclaimed a State of Disaster in the State of Michigan to activate this state's emergency management plan and enable Michigan to continue providing mutual aid and other state assets for Hurricane Katrina relief efforts;

WHEREAS, on September 7, 2005, the President of the United States declared that an emergency existed in the State of Michigan and ordered federal aid to supplement state and local response efforts to assist evacuees from the area struck by Hurricane Katrina and to provide emergency assistance to those areas beginning on August 29, 2005, and continuing;

WHEREAS, under the Emergency Management Act, 1976 PA 390, MCL 30.401 to 30.421, upon declaring a State of Disaster, the Governor may seek and accept assistance, either financial or otherwise, from the federal government, pursuant to federal law or regulation;

WHEREAS, under the Emergency Management Act, 1976 PA 390, MCL 30.401 to 30.421, upon the declaration of a State of Disaster the Governor also may suspend a regulatory statute, order, or rule prescribing the procedures for conduct of state business, when strict compliance with the statute, rule, or order would prevent, hinder, or delay necessary action in coping with the disaster;

WHEREAS, significant relief efforts are necessary to protect the public health, to preserve public safety, and to restore the social and economic welfare of persons impacted by the storm;

WHEREAS, many individuals affected by Hurricane Katrina have sought relief and assistance in the State of Michigan;

WHEREAS, some of the individuals seeking assistance have a continuing need for prescription medication that had been duly prescribed by licensed physicians in the States of Alabama, Louisiana, and Mississippi, but records of such prescriptions are unavailable as a result of the storm and its impact;

WHEREAS, appropriate measures must be taken in response to the disaster to ensure that those individuals whose prescriptions were lost or destroyed, or whose records are not available, will be able to continue to receive prescribed medications to assure their health, safety, and welfare;

NOW, THEREFORE, I, JENNIFER M. GRANHOLM, Governor of the State of Michigan, pursuant to the power and authority vested in the Governor by the Michigan Constitution of 1963 and Michigan law, order the following:

1. Subdivision (e) of Section 17763 of the Public Health Code 1978 PA 368, MCL 333.17763(e), and associated state regulations are suspended. Pharmacies and pharmacists licensed in this state may, in the exercise of their professional judgment, refill controlled substance prescriptions issued by licensed physicians in the States of Alabama, Louisiana, and Mississippi.

2. Subsection (1) of Section 17751 of the Public Health Code, 1978 PA 368, MCL 333.17751(1) and associated state regulations are suspended. Pharmacies and pharmacists licensed in this state may, in the exercise of their professional judgment, fill or dispense up to a 30-day supply of a non-controlled substance prescription for which a patient from the States of Alabama, Louisiana, or Mississippi affected by Hurricane Katrina does not have a refill prescription.

3. Those portions of Subsection (4) of Section 7333 and Subdivision (1)(a) of Section 7405 Public Health Code, 1978 PA 368, MCL 333.7333(4) and 333.7405(1)(a) related to the prohibition against refilling prescriptions for controlled substances without a refill prescription and associated state regulations are suspended. Pharmacies and pharmacists licensed in this state may, in the exercise of their professional judgment, refill schedule 3,
4, and 5 controlled substance prescriptions for up to a 30-day supply without a refill prescription.

The Department of Community Health is responsible for coordinating the implementation of this Order.

This Order is effective until the expiration of the State of Disaster declared under

Executive Order 2005-21, including any extensions of the State of Disaster.

Given under my hand and the Great Seal of the State of Michigan this 20th day of September in the year of our Lord, two thousand and five.

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JENNIFER M. GRANHOLM
GOVERNOR

BY THE GOVERNOR:

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SECRETARY OF STATE

## EXECUTIVE ORDERS

### EXECUTIVE ORDER No.2005 – 25

**STATE OF ENERGY EMERGENCY**
**EXTENSION FOR TEMPORARY USE OF DYED DIESEL FUEL**

WHEREAS, Section 1 of Article V of the Michigan Constitution of 1963 vests the executive power of the State of Michigan in the Governor;

WHEREAS, under Section 4 of 1982 PA 191, MCL 10.84, during a declared State of Energy Emergency the Governor may by executive order suspend a statute, an order, a rule of a state agency, or a specific provision of the statute, rule, or order if strict compliance with the statute, order, rule, or a specific provision of the statute, rule, or order will prevent, hinder, or delay necessary action in coping with the energy emergency;

WHEREAS, effective August 31, 2005, in response to shortages of clear diesel fuel caused by the effects of Hurricane Katrina, the federal Environmental Protection Agency is temporarily allowing regulated parties to supply motor vehicle diesel fuel having a sulfur content greater than 500 parts per million with visible evidence of red dye;

WHEREAS, in response to the effects of Hurricane Katrina on diesel fuel supplies on September 2, 2005, the federal Internal Revenue Service declared that it will not impose a penalty when dyed diesel fuel is sold for use or used on highways;

WHEREAS, Executive Order 2005-20 suspended certain provisions of Michigan law to allow the use of dyed diesel fuel on Michigan highways without penalty;

WHEREAS, the Internal Revenue Service has extended the penalty waiver through October 5, 2005;

WHEREAS, appropriate measures must be taken in Michigan to ensure that fuel supplies will remain sufficient and to assure the health, safety, and welfare of Michigan residents and visitors;

NOW, THEREFORE, I, JENNIFER M. GRANHOLM, Governor of the State of Michigan, pursuant to powers vested in the Governor by the Michigan Constitution of 1963 and Michigan law, order the following:

1. The suspension under Executive Order 2005-20 of provisions of the Motor Fuel Tax Act, 2000 PA 403, MCL 207.1001 to 207.1170, relating to dyed diesel fuel is extended through October 5, 2005.

This Order is effective upon filing.

Given under my hand and the Great Seal of the State of Michigan this 23rd day of September in the year of our Lord, two thousand and five.

_____

JENNIFER M. GRANHOLM
GOVERNOR

BY THE GOVERNOR:

_____

SECRETARY OF STATE

## ENROLLED SENATE AND HOUSE BILLS SIGNED INTO LAW OR VETOED (2005 SESSION)

*Mich. Const. Art. IV, §33 provides: "Every bill passed by the legislature shall be presented to the governor before it becomes law, and the governor shall have 14 days measured in hours and minutes from the time of presentation in which to consider it. If he approves, he shall within that time sign and file it with the secretary of state and it shall become law . . . If he does not approve, and the legislature has within that time finally adjourned the session at which the bill was passed, it shall not become law. If he disapproves . . . he shall return it within such 14-day period with his objections, to the house in which it originated."*

*Mich. Const. Art. IV, §27, further provides: "No act shall take effect until the expiration of 90 days from the end of the session at which it was passed, but the legislature may give immediate effect to acts by a two-thirds vote of the members elected to and serving in each house."*

*MCL 24.208 states in part:*

*"Sec. 8. (1) The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:*

* * *

*(b) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills signed into law by the governor during the calendar year and the corresponding public act numbers.*

*(c) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills vetoed by the governor during the calendar year."*

## ENROLLED SENATE AND HOUSE BILLS SIGNED INTO LAW OR VETOED (2005 SESSION)

| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 1 | | 234 | Yes | 3/24 | 3/24 | 3/24/05 | Traffic control; other; prohibition against sales and displays in the right-of-way of a state trunk line highway within cities or villages; revise. **(Sen. J. Gilbert)** |
| 2 | | 137 | Yes | 4/1 | 4/1 | 4/1/05 | Occupations; forensic polygraph examiners; requirement for criminal history check of applicants; provide for. **(Sen. A. Cropsey)** |
| 3 | 4210 | | Yes | 4/1 | 4/1 | 4/1/05 | Crimes; vehicle offenses; requirement for prosecution to show proof that a driver of a fleeing vehicle has knowledge of injuries; eliminate. **(Rep. J. Stakoe)** |
| 4 | 4413 | | Yes | 4/1 | 4/1 | 4/1/05 | Criminal procedure; DNA; deadline for filing petition for DNA testing in felony conviction cases; extend. **(Rep. T. Schuitmaker)** |
| 5 | 4197 | | Yes | 4/7 | 4/7 | 4/7/05 | Transportation; funds; contract for preservation of county local road system within townships; eliminate county population limitation and revise township population figure. **(Rep. P. LaJoy)** |
| 6 | 4054 | | Yes | 4/7 | 4/7 | 4/7/05 | Courts; juries; juror qualification questionnaires; omit requirement of sending to certain individuals disqualified from jury service. **(Rep. S. Bieda)** |
| 7 | 4233 | | Yes | 4/25 | 4/25 | 4/25/05 | Gaming; horse racing; applicant for an occupational license; require state and federal criminal history check. **(Rep. M. Hood)** |

* - I.E. means Legislature voted to give the Act immediate effect.
** - Act takes effect on the 91st day after *sine die* adjournment of the Legislature.
*** - See Act for applicable effective date.
+ - Line item veto
# - Tie bar

| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 8 | 4117 | | Yes | 4/25 | 4/25 | 4/25/05 | Townships; ordinances; differential pay for military service during military leave; allow. **(Rep. J. Proos)** |
| 9 | | 194 | Yes | 4/25 | 4/25 | 4/25/05 | Military affairs; other; coast guard commemoration date; revise. **(Sen. V. Garcia)** |
| 10 | | 235 | Yes | 4/28 | 4/28 | 4/28/05 | Appropriations; zero budget; capital outlay; provide for fiscal year ending September 30, 2005. **(Sen. S. Johnson)** |
| 11 | 4308 | | Yes | 4/28 | 4/28 | 4/28/05 | Appropriations; supplemental; supplemental appropriations; provide for fiscal year 2005-2006. **(Rep. S. Hummel)** |
| 12 | 4570 | | Yes | 4/28 | 4/28 | 4/28/05 # | Property tax; millage; effective date for millage reductions; revise for elections held after May 1. **(Rep. C. Ward)** |
| 13 | 4318 | | Yes | 5/4 | 5/4 | 5/4/05 | Economic development; downtown development authorities; notice requirements; modify. **(Rep. T. Meyer)** |
| 14 | 4013 | | Yes | 5/4 | 5/4 | 5/4/05 | Economic development; tax increment financing; notice requirements; modify. **(Rep. T. Meyer)** |
| 15 | 4012 | | Yes | 5/4 | 5/4 | 5/4/05 | Economic development; local development financing; notice requirements; modify. **(Rep. T. Meyer)** |
| 16 | 4415 | | Yes | 5/4 | 5/4 | 7/1/05 | Employment security; administration; certain revisions to unemployment compensation fund provision; revise to harmonize with anti-SUTA provisions. **(Rep. D. Robertson)** |
| 17 | 4414 | | Yes | 5/4 | 5/4 | 7/1/05 # | Employment security; administration; SUTA dumping prohibition; harmonize with transfer of business provisions. **(Rep. R. Gosselin)** |

* - I.E. means Legislature voted to give the Act immediate effect.
** - Act takes effect on the 91st day after *sine die* adjournment of the Legislature.
*** - See Act for applicable effective date.
+ - Line item veto
# - Tie bar

| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 18 | | 171 | Yes | 5/4 | 5/4 | 7/1/05 # | Employment security; administration; transfer of business to obtain favorable contribution rate; prohibit. **(Sen. J. Allen)** |
| 19 | | 174 | Yes | 5/4 | 5/4 | 7/1/05 # | Employment security; employers; definition of employer; revise to accommodate anti-SUTA provisions. **(Sen. D. Olshove)** |
| 20 | 4227 | | Yes | 5/4 | 5/5 | 5/5/05 # | Counties; boards and commissions; procedure for filling a county commissioner vacancy; clarify. **(Rep. C. Ward)** |
| 21 | | 199 | Yes | 5/19 | 5/19 | 5/19/05 | Liquor; retail sales; removal of a partially consumed bottle of wine from an establishment licensed to sell wine; allow under certain circumstances. **(Sen. J. Gilbert)** |
| 22 | 4242 | | Yes | 5/19 | 5/19 | 5/19/05 | Probate; other; foreign adoption name changes; provide simplified process for. **(Rep. S. Hummel)** |
| 23 | 4065 | | Yes | No | 5/23 | 5/23/05 | Property tax; assessments; correction of an incorrect uncapping of property taxes; allow. **(Rep. B. Caswell)** |
| 24 | 4188 | | Yes | 5/23 | 5/23 | 5/23/05 | Property tax; payment and collection; income threshold to defer summer taxes; increase. **(Rep. T. Rocca)** |
| 25 | 4454 | | Yes | 5/23 | 5/23 | 5/23/05 | Commercial code; secured transactions; priority of statutory liens; clarify. **(Rep. J. Hune)** |
| 26 | 4272 | | Yes | 5/23 | 5/23 | 5/23/05 | Cemeteries and funerals; veterans; purchase of United States flags to mark graves of veterans in certain cemeteries; provide for. **(Rep. T. Moore)** |
| 27 | 4273 | | Yes | 5/23 | 5/23 | 5/23/05 | Cemeteries and funerals; veterans; purchase of United States flags to mark graves of veterans in certain cemeteries; provide for. **(Rep. K. Elsenheimer)** |

* - I.E. means Legislature voted to give the Act immediate effect.
** - Act takes effect on the 91st day after *sine die* adjournment of the Legislature.
*** - See Act for applicable effective date.
+ - Line item veto
# - Tie bar

| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 28 | | 069 | Yes | 5/23 | 5/23 | 5/23/05 | Education; discipline; referral to the strict discipline academy; expand to include pupils suspended or expelled. **(Sen. P. Birkholz)** |
| 29 | 4482 | | Yes | 5/23 | 5/25 | 5/25/05 | Economic development; tax increment financing; definition of eligible obligation; expand to include certain management contracts or contracts for professional services. **(Rep. M. Nofs)** |
| 30 | 4225 | | Yes | 5/23 | 5/25 | 5/25/05 | Libraries; state; population criteria for state aid to public libraries; revise. **(Rep. E. Gaffney)** |
| 31 | 4142 | | Yes | 6/2 | 6/2 | 6/2/05 | Education; examinations; provisions in original MEAP authorizing statute relating to administration of state assessment program; revise. **(Rep. B. Palmer)** |
| 32 | 4603 | | Yes | 6/2 | 6/6 | 1/1/07 | Environmental protection; water pollution; unauthorized discharge of ballast water; provide for enforcement. **(Rep. D. Palsrok)** |
| 33 | | 332 | Yes | 6/2 | 6/6 | 6/6/05 # | Environmental protection; water pollution; discharge of aquatic nuisance species from oceangoing vessels; prohibit. **(Sen. P. Birkholz)** |
| 34 | 4008 | | Yes | 6/7 | 6/7 | 6/7/05 # | Higher education; tuition; reciprocal agreements with other states establishing tuition rates; require certain provisions and legislative approval of renewals. **(Rep. B. Caswell)** |
| 35 | 4528 | | Yes | 6/7 | 6/7 | 6/7/05 | Criminal procedure; statute of limitations; statute of limitations on conspiracy to commit murder; eliminate. **(Rep. D. Law)** |
| 36 | 4450 | | Yes | 6/7 | 6/7 | 6/7/05 | Vehicles; title; perfection of a security interest in a motor vehicle; provide for. **(Rep. D. Robertson)** |

* - I.E. means Legislature voted to give the Act immediate effect.
** - Act takes effect on the 91st day after *sine die* adjournment of the Legislature.
*** - See Act for applicable effective date.
+ - Line item veto
# - Tie bar

| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 37 | 4451 | | Yes | 6/7 | 6/7 | 6/7/05 | Vehicles; title; perfection of a security interest in a watercraft; provide for. **(Rep. K. Green)** |
| 38 | 4452 | | Yes | 6/7 | 6/7 | 6/7/05 | Mobile homes; title; perfection of a security interest in a mobile home; provide for. **(Rep. T. Hunter)** |
| 39 | 4453 | | Yes | 6/7 | 6/7 | 6/7/05 | Vehicles; title; security interest in an off-road vehicle; provide for perfection of. **(Rep. A. Dillon)** |
| 40 | 4677 | | Yes | 6/7 | 6/7 | 6/7/05 | Highways; name; certain portion of M-10; designate as the "Holocaust Memorial Highway". **(Rep. D. Law)** |
| 41 | | 077 | Yes | 6/7 | 6/7 | 6/7/05 | Education; curricula; certain ROTC classes; consider as pupil instruction time. **(Sen. G. Van Woerkom)** |
| 42 | 4774 | | Yes | 6/9 | 6/9 | 6/9/05 | Environmental protection; water pollution; baseline environmental assessment program; extend sunset to 2007. **(Rep. C. Kolb)** |
| 43 | | 195 | Yes | 6/16 | 6/16 | 6/16/05 | State agencies (existing); agriculture; administrative civil fine under certain circumstances for operation of an agricultural labor camp without a license; provide for. **(Sen. V. Garcia)** |
| 44 | 4356 | | Yes | 6/16 | 6/16 | 6/16/05 | Torts; civil procedure; triple damage liability relating to stolen property; extend to person who steals or embezzles property. **(Rep. T. Rocca)** |
| 45 | 4602 | | Yes | 6/16 | 6/16 | 6/16/05 | Transportation; funds; maintenance definition; revise. **(Rep. P. LaJoy)** |
| 46 | | 225 | Yes | 6/16 | 6/16 | 6/16/05 | Agriculture; other; agriculture tourism advisory commission; create within department of agriculture. **(Sen. C. Brown)** |
| 47 | | 226 | Yes | 6/16 | 6/16 | 6/16/05 | Agriculture; other; agriculture and rural community roundtable; require director of department of natural resources to convene. **(Sen. J. Gilbert)** |

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*** - See Act for applicable effective date.
+ - Line item veto
# - Tie bar

| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 48 | | 384 | Yes | 6/17 | 6/17 | 6/17/05 | Holidays; "Juneteenth National Freedom Day" and "Sojourner Truth Day"; designate as third Saturday in June and November 26, respectively. **(Sen. M. Scott)** |
| 49 | 4447 | | Yes | 6/23 | 6/23 | 6/23/05 | Occupations; athletics; Michigan boxing regulatory act; provide for revisions and clarification. **(Rep. D. Robertson)** |
| 50 | 4551 | | Yes | 6/23 | 6/23 | 6/23/05 | Construction; code; multiple buildings to share an elevator; allow. **(Rep. K. Elsenheimer)** |
| 51 | 4613 | | Yes | 6/27 | 6/27 | 6/27/05 # | State agencies (existing); agriculture; state civil infraction citations; authorize to issue. **(Rep. B. Caul)** |
| 52 | 4560 | | Yes | 6/27 | 6/27 | 6/27/05 # | Natural resources; nonnative species; violations of emerald ash borer quarantine; revise penalties for. **(Rep. T. Moore)** |
| 53 | 4562 | | Yes | 6/27 | 6/27 | 6/27/05 | Natural resources; nonnative species; moving emerald ash borer, firewood, or quarantined articles; revise penalties for. **(Rep. G. Newell)** |
| 54 | 4567 | | Yes | 6/27 | 6/27 | 9/1/05 # | Natural resources; nonnative species; sentencing guidelines for crimes of violating insect and plant pest quarantines; establish. **(Rep. D. Booher)** |
| 55 | 4444 | | Yes | 6/30 | 6/30 | 6/30/05 # | Natural resources; soil and erosion; soil erosion and sedimentation control program; provide exemptions for gardening and seawall maintenance. **(Rep. P. Pavlov)** |
| 56 | | 282 | Yes | 6/30 | 6/30 | 6/30/05 # | Natural resources; soil and erosion; soil erosion and sedimentation control program; provide exemption from **permit requirements for certain activities.** **(Sen. J. Gilbert)** |
| 57 | | 073 | Yes | 6/30 | 6/30 | 6/30/05 | Environmental protection; air pollution; nonattainment area offsets; establish conditions for. **(Sen. P. Birkholz)** |

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| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 58 | | 551 | Yes | 6/30 | 6/30 | 6/30/05 | Communications; telecommunications; rule making and eliminate sunset of the Michigan telecommunications act; provide for. **(Sen. B. Patterson)** |
| 59 | 4623 | | Yes | 7/7 | 7/7 | 7/7/05 | Agriculture; associations and commissions; potato commission; allow to reapportion either the number of commission members or members districts. **(Rep. N. Nitz)** |
| 60 | | 512 | Yes | 7/7 | 7/7 | 7/7/05 | Libraries; district; filing deadline for board member election; revise and revise certification process. **(Sen. B. Hammerstrom)** |
| 61 | | 514 | Yes | 7/7 | 7/7 | 7/7/05 | Education; school districts; certain references to election law in revised school code; correct. **(Sen. N. Cassis)** |
| 62 | | 515 | Yes | 7/7 | 7/7 | 7/7/05 | Higher education; community colleges; filing deadline for college trustee; revise and eliminate requirement that community college election be held same time as school elections. **(Sen. N. Cassis)** |
| 63 | | 516 | Yes | 7/7 | 7/7 | 7/7/05 | Villages; home rule; terms of office; clarify. **(Sen. J. Allen)** |
| 64 | | 517 | Yes | 7/7 | 7/7 | 7/7/05 | Cities; home rule; terms of office; clarify. **(Sen. J. Allen)** |
| 65 | | 518 | Yes | 7/7 | 7/7 | 7/7/05 | Villages; general law; terms of office; clarify. **(Sen. J. Allen)** |
| 66 | | 02 | Yes | 7/7 | 7/7 | 7/7/05 | Agriculture; animals; procedure used for composting of dead animals; revise. **(Sen. R. Jelinek)** |
| 67 | | 412 | Yes | 7/7 | 7/7 | 7/7/05 | State; authorities; state building authority act; revise to include capital maintenance improvements. **(Sen. M. Prusi)** |
| 68 | 4635 | | Yes | 7/11 | 7/11 | 7/11/05 | Agriculture; fertilizer; sale of ammonium nitrate; regulate circumstances of its sale. **(Rep. G. Hansen)** |

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| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 69 | | 079 | Yes | 7/11 | 7/11 | 7/11/05 | Counties; other; voter approval for waste reduction program and funding amounts; provide for. **(Sen. M. McManus)** |
| 70 | | 167 | Yes | 7/11 | 7/11 | 7/1/07 | Occupations; individual licensing and regulation; requirement for continuing education; provide for on-line credit option. **(Sen. M. McManus)** |
| 71 | | 513 | Yes | 7/14 | 7/14 | 7/14/05 | Elections; other; use of digitized signatures and general amendments to Michigan election law; provide for. **(Sen. B. Hammerstrom)** |
| 72 | 4434 | | Yes | 7/19 | 7/19 | 7/19/05 | Health; pharmaceuticals; centralized prescription processing; provide for. **(Rep. S. Hummel)** |
| 73 | | 352 | Yes | 7/19 | 7/19 | 7/19/05 | Health; pharmaceuticals; procedures required to refill a prescription from another pharmacy; exempt under certain circumstances to allow for centralized prescription processing. **(Sen. B. Hardiman)** |
| 74 | 4714 | | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; invasive species advisory council; establish. **(Rep. P. Pavlov)** |
| 75 | 4715 | | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; invasive species advisory council; specify duties of. **(Rep. G. Hansen)** |
| 76 | 4716 | | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; penalties; revise and extend to cover violations relating to aquatic plants. **(Rep. D. Farhat)** |
| 77 | | 211 | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; prohibited insect and aquatic plant species; identify. **(Sen. P. Birkholz)** |
| 78 | | 212 | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; prohibition on possession of certain species; create exceptions to. **(Sen. G. Van Woerkom)** |

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| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 79 | | 213 | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; genetically engineered, nonnative, prohibited, or restricted aquatic plants and prohibited insects; prohibit introduction of. **(Sen. T. Stamas)** |
| 80 | | 215 | Yes | 7/19 | 7/19 | 7/19/05 | Natural resources; nonnative species; requirements and penalties; require to post on department of natural resources website and create invasive species fund. **(Sen. J. Gilbert)** |
| 81 | | 507 | Yes | 7/19 | 7/19 | 9/1/05 | Criminal procedure; sentencing guidelines; prohibited, restricted, genetically engineered, or nonnative aquatic plants and prohibited insects; establish sentencing guidelines for possession or introduction of. **(Sen. R. Basham)** |
| 82 | 4826 | | Yes | 7/19 | 7/19 | 7/19/05 | Children; abuse or neglect; number of public members on the child abuse and neglect prevention board; increase. **(Rep. R. Baxter)** |
| 83 | | 446 | Yes | 7/19 | 7/19 | 7/19/05 | Insurance; other; quality assurance assessment tax on medicaid managed care organizations; implement. **(Sen. G. Jacobs)** |
| 84 | | 447 | Yes | 7/19 | 7/19 | 7/19/05 | Human services; medical services; specialty prepaid health plans as medicaid managed care organizations; designate. **(Sen. G. Jacobs)** |
| 85 | 4405 | | Yes | 7/19 | 7/19 | 7/19/05 | Occupations; pharmacists; prohibition against utilizing the mail when a prescription is received by mail; eliminate. **(Rep. G. Whitmer)** |
| 86 | 4322 | | Yes | 7/19 | 7/20 | 7/20/05 | Health; pharmaceuticals; sale of certain over-the-counter products containing pseudoephedrine or ephedrine; prohibit and limit under certain circumstances. **(Rep. R. Jones)** |

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| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 87 | | 189 | Yes | 7/19 | 7/20 | 12/15/05 | Health; pharmaceuticals; sale of certain over-the-counter products containing pseudoephedrine or ephedrine; require to be maintained behind counter, in a locked case, or within 20 feet of the counter under certain circumstances and require photo identification. **(Sen. P. Birkholz)** |
| 88 | 4607 | | Yes | 7/20 | 7/20 | 7/20/05 | Traffic control; other; posting of year-round school session signage; allow. **(Rep. J. Stakoe)** |
| 89 | 4821 | | Yes | 7/20 | 7/20 | 7/20/05 | Health; medical records; definition of "review entity"; expand to include an organization established by a state association of pharmacists for peer review of pharmacists in this state. **(Rep. L. Mortimer)** |
| 90 | | 302 | Yes | 7/20 | 7/20 | 7/20/05 | State; purchasing; reporting requirements of certain departments for contracts with businesses owned by persons with disabilities; modify. **(Sen. V. Bernero)** |
| 91 | | 303 | Yes | 7/20 | 7/20 | 7/20/05 | State; purchasing; state procurement program for small businesses owned by veterans with service-related disabilities; create. **(Sen. L. Toy)** |
| 92 | | 406 | Yes | 7/20 | 7/20 | 7/20/05 | State; bonds; school bond qualification, approval, and loan act; create. **(Sen. G. Jacobs)** |
| 93 | | 407 | Yes | 7/20 | 7/20 | 7/20/05 | State; bonds; amendments to shared credit rating act to conform with jobs today school bond qualification, approval, and loan act; provide for. **(Sen. M. Switalski)** |
| 94 | | 408 | Yes | 7/20 | 7/20 | 7/20/05 | State; bonds; school bond loan fund program; revise. **(Sen. H. Clarke)** |
| 95 | | 410 | Yes | 7/20 | 7/20 | 7/20/05 | Education; financing; amendments to state school aid act to conform with school bond qualification, approval, and loan act; provide for. **(Sen. B. Leland)** |

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| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| 96 | | 411 | Yes | 7/20 | 7/20 | 7/20/05 | Criminal procedure; sentencing guidelines; sentencing guidelines for certain crimes relating to school bonds; enact. **(Sen. D. Cherry)** |
| 97 | | 257 | Yes | 7/20 | 7/20 | 7/20/05 | Liquor; licenses; resort licenses; provide for, make certain license fee revisions, and earmark certain money. **(Sen. B. Hammerstrom)** |
| 98 | | 279 | Yes | 7/21 | 7/22 | 7/22/05 | Appropriations; school aid; supplemental school aid appropriations; provide for fiscal year 2004-2005. **(Sen. M. Switalski)** |
| 99 | | 306 | Yes | 7/21 | 7/22 | 7/22/05 | Property; conveyances; transfer of certain state owned property in Eaton county; provide for. **(Sen. P. Birkholz)** |
| 100 | | 136 | Yes | 7/21 | 7/22 | 7/22/05 | Higher education; other; issuance or use of false academic degrees or credentials; prohibit. **(Sen. T. George)** |
| 101 | | 482 | Yes | 7/21 | 7/22 | 7/22/05 | Economic development; brownfield redevelopment authority; payment of financing costs; allow under certain circumstances. **(Sen. J. Allen)** |
| 102 | | 525 | Yes | 7/21 | 7/22 | 7/22/05 | Economic development; other; early stage venture investment corporation; allow multiple fund managers, provide for tax vouchers, and provide other amendments. **(Sen. M. Bishop)** |
| 103 | | 522 | Yes | 7/21 | 7/22 | 7/22/05 | Public utilities; other; use of highway by public utilities; provide for under certain conditions. **(Sen. M. McManus)** |

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| Public Act No. | Enrolled House Bill | Enrolled Senate Bill | I.E.* Yes / No | Governor Approved Date | Filed Date | Effective Date | Subject |
|---|---|---|---|---|---|---|---|
| Veto | 4275 | | | | | 7/21/05 | Elections; canvassing; state board of canvassers procedures; clarify. **(Rep. B. Vander Veen)** |

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# - Tie bar

## MICHIGAN ADMINISTRATIVE CODE TABLE
## (2005 SESSION)

*MCL 24.208 states in part:*

*"Sec. 8. (1) The State Office of Administrative Hearings and Rules shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:*

* * *

*(i) Other official information considered necessary or appropriate by the State Office of Administrative Hearings and Rules."*

*The following table cites administrative rules promulgated during the year 2000, and indicates the effect of these rules on the Michigan Administrative Code (1979 ed.).*

## MICHIGAN ADMINISTRATIVE CODE TABLE
## (2005 RULE FILINGS)

| R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue |
|---|---|---|---|---|---|---|---|---|
| 125.1305 | * | 2 | 285.50.12 | R | 1 | 325.723 | R | 12 |
| 125.1315 | * | 2 | 299.4102 | * | 2 | 325.724 | R | 12 |
| 200.5 | A | 12 | 299.4103 | * | 2 | 325.725 | R | 12 |
| 200.10 | A | 12 | 299.4105 | * | 2 | 325.726 | R | 12 |
| 200.20 | A | 12 | 299.4307 | * | 2 | 325.727 | R | 12 |
| 200.50 | A | 12 | 299.4315 | * | 2 | 325.728 | R | 12 |
| 200.80 | A | 12 | 299.4318 | * | 2 | 325.729 | R | 12 |
| 200.90 | A | 12 | 299.4319 | * | 2 | 325.73 | R | 12 |
| 200.95 | A | 12 | 299.4412 | * | 2 | 325.731 | R | 12 |
| 282.10 | R | 1 | 299.4439 | * | 2 | 325.732 | R | 12 |
| 282.20 | R | 1 | 299.4440 | * | 2 | 325.733 | R | 12 |
| 282.30 | R | 1 | 299.4441 | * | 2 | 325.734 | R | 12 |
| 282.40 | R | 1 | 299.4442 | * | 2 | 325.2659 | R | 12 |
| 282.50 | R | 1 | 299.4443 | * | 2 | 325.2671 | * | 9 |
| 282.60 | R | 1 | 299.4444 | * | 2 | 325.2672 | * | 9 |
| 282.70 | R | 1 | 299.4445 | * | 2 | 325.2673 | * | 9 |
| 282.80 | R | 1 | 299.4451 | * | 2 | 325.2674 | * | 9 |
| 282.90 | R | 1 | 299.4453 | * | 2 | 325.9901 | R | 7 |
| 282.10 | R | 1 | 299.4907 | * | 2 | 325.9902 | R | 7 |
| 282.11 | R | 1 | 299.4908 | * | 2 | 325.9903 | R | 7 |
| 282.21a | R | 1 | 323.2102 | * | 6 | 325.9904 | R | 7 |
| 282.21b | R | 1 | 323.2103 | * | 6 | 325.9905 | R | 7 |
| 282.22 | R | 1 | 323.2104 | * | 6 | 325.9906 | R | 7 |
| 282.23 | R | 1 | 323.2108 | * | 6 | 325.9907 | R | 7 |
| 282.24 | R | 1 | 323.2109 | * | 6 | 325.9908 | R | 7 |
| 282.51 | R | 1 | 323.2189 | * | 6 | 325.9909 | R | 7 |
| 282.52 | R | 1 | 323.2196 | A | 6 | 325.9910 | R | 7 |
| 282.53 | R | 1 | 325.61 | N | 18 | 325.9911 | R | 7 |
| 285.50.1 | R | 1 | 325.62 | N | 18 | 325.9912 | R | 7 |
| 285.50.2 | R | 1 | 325.63 | N | 18 | 325.9913 | R | 7 |
| 285.50.3 | R | 1 | 325.64 | N | 18 | 325.9914 | R | 7 |
| 285.50.4 | R | 1 | 325.65 | N | 18 | 325.9915 | R | 7 |
| 285.50.5 | R | 1 | 325.66 | N | 18 | 325.9916 | R | 7 |
| 285.50.6 | R | 1 | 325.67 | N | 18 | 325.9917 | R | 7 |
| 285.50.7 | R | 1 | 325.68 | N | 18 | 325.9918 | R | 7 |
| 285.50.8 | R | 1 | 325.172 | * | 18 | 325.9919 | R | 7 |
| 285.50.9 | R | 1 | 325.173 | * | 18 | 325.9920 | R | 7 |
| 285.50.10 | R | 1 | 325.721 | R | 12 | 325.9921 | R | 7 |
| 285.50.11 | R | 1 | 325.722 | R | 12 | 325.9922 | R | 7 |

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

| R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue |
|---|---|---|---|---|---|---|---|---|
| 325.9923 | R | 7 | 325.12706 | * | 6 | 325.99404 | A | 7 |
| 325.9924 | R | 7 | 325.48001 | A | 14 | 325.99405 | A | 7 |
| 325.9925 | R | 7 | 325.52001 | A | 7 | 325.99406 | A | 7 |
| 325.10104 | * | 6 | 325.52002 | A | 7 | 325.99407 | A | 7 |
| 325.10308b | * | 6 | 325.52003 | A | 7 | 325.99408 | A | 7 |
| 325.10313 | A | 6 | 325.52004 | A | 7 | 336.2011 | * | 8 |
| 325.10401a | * | 8 | 325.52005 | A | 7 | 338.108 | * | 1 |
| 325.10405 | * | 8 | 325.52006 | A | 7 | 338.256 | * | 1 |
| 325.10408b | * | 8 | 325.52007 | A | 7 | 338.256a | * | 1 |
| 325.10414 | * | 8 | 325.52008 | A | 7 | 338.256b | * | 1 |
| 325.10603 | * | 6 | 325.52009 | A | 7 | 338.257 | * | 1 |
| 325.10604 | * | 6 | 325.52010 | A | 7 | 338.275 | * | 1 |
| 325.10604b | * | 6 | 325.52011 | A | 7 | 338.2303 | * | 1 |
| 325.10604c | * | 6 | 325.52012 | A | 7 | 338.2501 | * | 18 |
| 325.10604d | * | 6 | 325.60052 | * | 7 | 338.2506 | * | 18 |
| 325.10605 | * | 6 | 325.66401 | A | 12 | 338.2507 | * | 18 |
| 325.10610 | * | 6 | 325.99101 | A | 7 | 338.2507a | * | 18 |
| 325.10611 | * | 6 | 325.99102 | A | 7 | 338.2510 | * | 18 |
| 325.10611b | * | 6 | 325.99103 | A | 7 | 338.2510a | A | 18 |
| 325.10611c | A | 6 | 325.99104 | A | 7 | 338.2901 | * | 12 |
| 325.10710 | * | 6 | 325.99201 | A | 7 | 338.2906 | * | 12 |
| 325.10716 | * | 6 | 325.99202 | A | 7 | 338.2906a | R | 12 |
| 325.10717 | * | 6 | 325.99203 | A | 7 | 338.2907a | A | 12 |
| 325.10717b | * | 6 | 325.99204 | A | 7 | 338.2907b | A | 12 |
| 325.10719a | R | 6 | 325.99205 | A | 7 | 338.2908 | R | 12 |
| 325.10719b | R | 6 | 325.99206 | A | 7 | 338.2908a | R | 12 |
| 325.10719c | R | 6 | 325.99207 | A | 7 | 338.2908b | R | 12 |
| 325.10719d | R | 6 | 325.99208 | A | 7 | 338.2908c | R | 12 |
| 325.10720 | * | 6 | 325.99209 | A | 7 | 338.2908d | R | 12 |
| 325.10720a | * | 6 | 325.99210 | A | 7 | 338.2908e | A | 12 |
| 325.10722 | * | 6 | 325.99211 | A | 7 | 338.2908f | A | 12 |
| 325.10725 | * | 6 | 325.99212 | A | 7 | 338.2908g | A | 12 |
| 325.10726 | * | 6 | 325.99213 | A | 7 | 338.2908h | A | 12 |
| 325.10728 | * | 6 | 325.99301 | A | 7 | 338.2908i | A | 12 |
| 325.10729 | * | 6 | 325.99302 | A | 7 | 338.2908j | A | 12 |
| 325.10730 | * | 6 | 325.99303 | A | 7 | 338.2908k | A | 12 |
| 325.11506 | * | 6 | 325.99401 | A | 7 | 338.2908l | A | 12 |
| 325.12702 | * | 6 | 325.99402 | A | 7 | 338.2908m | A | 12 |
| 325.12705 | * | 6 | 325.99403 | A | 7 | 338.2908n | A | 12 |

| R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue |
|---|---|---|---|---|---|---|---|---|
| 338.2908o | A | 12 | 339.263 | A | 9 | 339.3228 | R | 9 |
| 338.2909 | * | 12 | 339.265 | A | 9 | 339.3229 | R | 9 |
| 338.2910 | * | 12 | 339.267 | A | 9 | 339.3230 | R | 9 |
| 339.101 | A | 9 | 339.269 | A | 9 | 339.3231 | R | 9 |
| 339.102 | A | 9 | 339.301 | A | 9 | 339.3232 | R | 9 |
| 339.201 | A | 9 | 339.303 | A | 9 | 339.3233 | R | 9 |
| 339.202 | A | 9 | 339.401 | A | 9 | 339.3234 | R | 9 |
| 339.203 | A | 9 | 339.403 | A | 9 | 339.3235 | R | 9 |
| 339.204 | A | 9 | 339.3101 | R | 9 | 339.3236 | R | 9 |
| 339.205 | A | 9 | 339.3102 | R | 9 | 340.481 | R | 9 |
| 339.206 | A | 9 | 339.3201 | R | 9 | 340.482 | * | 9 |
| 339.207 | A | 9 | 339.3202 | R | 9 | 340.483 | R | 9 |
| 339.209 | A | 9 | 339.3203 | R | 9 | 340.484 | * | 9 |
| 339.211 | A | 9 | 339.3204 | R | 9 | 340.485 | * | 9 |
| 339.213 | A | 9 | 339.3205 | R | 9 | 340.487 | * | 9 |
| 339.215 | A | 9 | 339.3206 | R | 9 | 340.1746 | * | 10 |
| 339.217 | A | 9 | 339.3207 | R | 9 | 340.1756 | * | 10 |
| 339.219 | A | 9 | 339.3207a | R | 9 | 340.1757 | * | 10 |
| 339.221 | A | 9 | 339.3208 | R | 9 | 340.1781 | * | 10 |
| 339.223 | A | 9 | 339.3209 | R | 9 | 340.1782 | * | 10 |
| 339.225 | A | 9 | 339.3210 | R | 9 | 340.1783a | * | 10 |
| 339.227 | A | 9 | 339.3210a | R | 9 | 340.1786 | * | 10 |
| 339.229 | A | 9 | 339.3211 | R | 9 | 340.1787 | * | 10 |
| 339.231 | A | 9 | 339.3212 | R | 9 | 340.1788 | * | 10 |
| 339.233 | A | 9 | 339.3213 | R | 9 | 340.1799 | * | 10 |
| 339.235 | A | 9 | 339.3214 | R | 9 | 340.1799g | A | 10 |
| 339.237 | A | 9 | 339.3215 | R | 9 | 340.1799a | * | 10 |
| 339.239 | A | 9 | 339.3216 | R | 9 | 340.1831 | * | 10 |
| 339.241 | A | 9 | 339.3217 | R | 9 | 340.1881 | A | 10 |
| 339.243 | A | 9 | 339.3218 | R | 9 | 340.1882 | A | 10 |
| 339.245 | A | 9 | 339.3219 | R | 9 | 340.1883 | A | 10 |
| 339.247 | A | 9 | 339.3220 | R | 9 | 340.1884 | A | 10 |
| 339.249 | A | 9 | 339.3221 | R | 9 | 340.1885 | A | 10 |
| 339.251 | A | 9 | 339.3222 | R | 9 | 390.661 | * | 18 |
| 339.253 | A | 9 | 339.3223 | R | 9 | 395.3 | * | 12 |
| 339.255 | A | 9 | 339.3224 | R | 9 | 395.4 | * | 12 |
| 339.257 | A | 9 | 339.3225 | R | 9 | 395.31 | * | 12 |
| 339.259 | A | 9 | 339.3226 | R | 9 | 395.32 | * | 12 |
| 339.261 | A | 9 | 339.3227 | R | 9 | 395.33 | * | 12 |

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

| R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue |
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| 408.893 | A | 2 | 408.41647 | * | 16 | 418.10140 | * | 2 |
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| 408.41645 | * | 16 | 418.10121 | * | 2 | 460.13603 | R | 11 |
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| 460.13606 | R | 11 | 484.507 | A | 9 | 484.561 | N | 15 |
| 460.13701 | R | 11 | 484.508 | A | 9 | 484.571 | N | 15 |
| 460.13702 | R | 11 | 484.509 | A | 9 | 484.401 | R | 15 |
| 460.13703 | R | 11 | 484.510 | A | 9 | 484.402 | R | 15 |
| 460.13704 | R | 11 | 484.511 | A | 9 | 484.421 | R | 15 |
| 460.13705 | R | 11 | 484.512 | A | 9 | 484.422 | R | 15 |
| 460.13706 | R | 11 | 484.519 | N | 15 | 484.423 | R | 15 |
| 460.13707 | R | 11 | 484.52 | N | 15 | 484.424 | R | 15 |
| 484.1 | R | 11 | 484.521 | N | 15 | 484.425 | R | 15 |
| 484.2 | R | 11 | 484.522 | N | 15 | 484.431 | R | 15 |
| 484.21 | R | 11 | 484.523 | N | 15 | 484.434 | R | 15 |
| 484.22 | R | 11 | 484.524 | N | 15 | 484.435 | R | 15 |
| 484.23 | R | 11 | 484.525 | N | 15 | 484.438 | R | 15 |
| 484.24 | R | 11 | 484.531 | N | 15 | 484.439 | R | 15 |
| 484.31 | R | 11 | 484.534 | N | 15 | 484.440 | R | 15 |
| 484.32 | R | 11 | 484.535 | N | 15 | 484.440a | R | 15 |
| 484.33 | R | 11 | 484.538 | N | 15 | 484.440b | R | 15 |
| 484.34 | R | 11 | 484.539 | N | 15 | 484.440c | R | 15 |
| 484.41 | R | 11 | 484.54 | N | 15 | 484.441 | R | 15 |
| 484.42 | R | 11 | 484.540a | N | 15 | 484.442 | R | 15 |
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| 484.44 | R | 11 | 484.540c | N | 15 | 484.444 | R | 15 |
| 484.51 | R | 11 | 484.540c | N | 15 | 484.445 | R | 15 |
| 484.52 | R | 11 | 484.541 | N | 15 | 484.446 | R | 15 |
| 484.53 | R | 11 | 484.542 | N | 15 | 484.451 | R | 15 |
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| 484.505 | A | 9 | 484.559 | N | 15 | 500.2152 | A | 6 |

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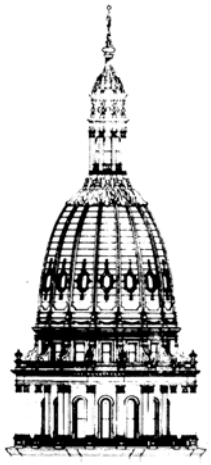
| R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue | R Number | Action | 2005 MR Issue |
|---|---|---|---|---|---|---|---|---|
| 500.2153 | A | 6 | | | | | | |
| 500.2154 | A | 6 | | | | | | |
| 500.2155 | A | 6 | | | | | | |

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)



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